



# Statement of Expenditures

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> ORA Columbus Local Restaurant Alliance PAC				
To Whom Paid The Huntington National Bank		Date (MM/DD/YYYY) 08/15/2019		Amount \$18.00
Street Address 7 Easton Oval		Purpose Service Fees		
City Columbus	State OH	Zip Code 43219	Check Number NA	
To Whom Paid The Huntington National Bank		Date (MM/DD/YYYY) 09/16/2019		Amount \$5.00
Street Address 7 Easton Oval		Purpose Service Fee		
City Columbus	State OH	Zip Code 43219	Check Number NA	
To Whom Paid The Huntington National Bank		Date (MM/DD/YYYY) 10/15/2019		Amount \$5.00
Street Address 7 Easton Oval		Purpose Service Fee		
City Columbus	State OH	Zip Code 43219	Check Number NA	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State	Zip Code	Check Number	
	OH			
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State	Zip Code	Check Number	
	OH			

Page Total \$ 28.00