



# Statement of Expenditures

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Committee to Elect Aileen Wagner			
To Whom Paid ACH Trace		Date (MM/DD/YYYY) 04/01/2019	Amount 2.50
Street Address		Purpose Credit card processing	
City	State OH	Zip Code	Check Number
To Whom Paid Wix.com		Date (MM/DD/YYYY) 04/18/2019	Amount 168.00
Street Address		Purpose web hosting/domain	
City	State OH	Zip Code	Check Number
To Whom Paid Wix.com		Date (MM/DD/YYYY) 04/18/2019	Amount 36.00
Street Address		Purpose email domain	
City	State OH	Zip Code	Check Number
To Whom Paid Expenditures from Form 31-F		Date (MM/DD/YYYY) 04/23/2019	Amount 34.40
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid ACH Trace		Date (MM/DD/YYYY) 05/02/2019	Amount 2.50
Street Address		Purpose credit card processing	
City	State OH	Zip Code	Check Number

Page Total \$ 243.40