



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends for Amy Lloyd				
To Whom Paid PayPal		Date (MM/DD/YYYY) 08/29/2019		Amount \$1.03
Street Address PO Box 45950		Purpose Transaction Fee		
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee	
To Whom Paid PayPal		Date (MM/DD/YYYY) 09/03/2019		Amount \$3.20
Street Address PO Box 45950		Purpose Transaction Fee		
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee	
To Whom Paid PayPal		Date (MM/DD/YYYY) 09/11/2019		Amount \$1.75
Street Address PO Box 45950		Purpose Transaction Fee		
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee	
To Whom Paid PayPal		Date (MM/DD/YYYY) 09/14/2019		Amount \$3.20
Street Address PO Box 45950		Purpose Transaction Fee		
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee	
To Whom Paid PayPal		Date (MM/DD/YYYY) 09/15/2019		Amount \$1.75
Street Address PO Box 45950		Purpose Transaction Fee		
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee	

Page Total \$ 10.93