



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Kelly Needleman			
To Whom Paid Stripe, Inc.		Date (MM/DD/YYYY) October 2019	Amount \$29.83
Street Address 510 Townsend Street		Purpose Online credit card processing fees - see attached detail by transaction	
City San Francisco	State CA	Zip Code 94103	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 29.83