



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Friends of Beth Kowalczyk				
To Whom Paid Paypal		Date (MM/DD/YYYY) 07/14/17		Amount 1.03
Street Address 2211 North First Street		Purpose Transfer Fee		
City San Jose	State CA <input type="checkbox"/>	Zip Code 95131	Check Number Debit	
To Whom Paid Paypal		Date (MM/DD/YYYY) 07/17/17		Amount 1.03
Street Address 2211 North First Street		Purpose Transfer Fee		
City San Jose	State CA <input type="checkbox"/>	Zip Code 95131	Check Number Debit	
To Whom Paid Paypal		Date (MM/DD/YYYY) 07/17/17		Amount 1.17
Street Address 2211 North First Street		Purpose Transfer Fee		
City San Jose	State CA <input type="checkbox"/>	Zip Code 95131	Check Number Debit	
To Whom Paid American Impressions		Date (MM/DD/YYYY) 07/19/17		Amount 265.53
Street Address 6969 Worthington-Galena Rd		Purpose T Shirts		
City Worthington	State OH <input type="checkbox"/>	Zip Code 43085	Check Number 1001	
To Whom Paid Franklin County Board of Elections		Date (MM/DD/YYYY) 07/28/17		Amount 45.00
Street Address 1700 Morse Road		Purpose Filing Fee		
City Columbus	State OH <input type="checkbox"/>	Zip Code 43229	Check Number 1002	

Page Total \$ 313.76