



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Benjamin Kessler for Bexley Mayor			
To Whom Paid First Financial Bank		Date (MM/DD/YYYY) 12/31/2019	Amount 6.00
Street Address PO Box 476		Purpose Bank Fee	
City Hamilton Ohio	State OH	Zip Code 45012	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
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ ~~4.05~~ 6