



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee	· · · · · · · · · · · · · · · · · · ·				
WHITNEY SMITH FOR OHIO					
To Whom Paid		_	Date (MM/DD/YYYY)		Amount
WIX.COM			10/19/201		16.00
Street Address	Purpose				
200 SE 8TH STREET	SERVICE FEES				
City	State	Zip	Zip Code Check Number		
FT LAUDERDALE	FL	333	301		
To Whom Paid			Date (MM/DD/YYYY)		Amount
WIX.COM		10		9/2018 16.00	
Street Address	Purpose				
200 SE 8TH STREET	SERVICE FEES				
City	State	Zip	Code Check		ck Number
FT LAUDERDALE	FL	333	301		
To Whom Paid	<u> </u>		Date (MM/DD/YYYY)		Amount
WIX.COM			11/07/20	18	16.00
Street Address	Purpose				
200 SE 8TH STREET	SERVICE FEES				
City	State	Zip	Zip Code Check Number		
FT LAUDERDALE	FL	333	301		
To Whom Paid			Date (MM/DD/YYYY)		Amount
WIX.COM			11/19/20	18	16.00
Street Address	Purpose				
200 SE 8TH STREET	SERVICE FEES				
City	State	Zip	Code	Che	ck Number
FT LAUDERDALE	FL	333	301		
To Whom Paid	<u> </u>		Date (MM/DD/YYYY)		Amount
WIX.COM			11/29/20	18	16.00
Street Address	Purpose				
200 SE 8TH STREET	SERVICE FEES				
City	State	Zip	Code	Che	ck Number
FT LAUDERDALE	FL	333	301		

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ı	Page Total \$ 80.00
ı	raye rolary