



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee		···				
Friends of Flower						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
US Post Office			01/18/2019		\$10.00	
Street Address	Purpose					
	Purchase Stamps					
City	State	Zip Code Check Number				
	ОН		:			
To Whom Paid	Date (MM/DD/YYYY) Amount		Amount			
VistaPrint			01/22/20		19 \$130.66	
Street Address	Purpose					
	Campaign Literature					
City	State	Zip	p Code Check Number			
	он					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Office Max			02/12/20)19	\$1.12	
Street Address	Purpose					
	Copies of Petition					
City	State	Zip	Code Check Number		ck Number	
	он					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Walgreens			02/19/2019 \$5.36		\$5.36	
Street Address	Purpose					
	Picture Printed					
City	State	Zip	Code	Che	ck Number	
	ОН					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Wal Mart		l	02/19/20)19	\$3.02	
Street Address	Purpose					
	Sign Holder					
City	State	Zip Code Check Number		ck Number		
	ОН					

	\$ ^{\$150.16}	
Page Total	\$	