



**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) 08/02/17	Amount 1.32
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) 08/05/17	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) 08/11/17	Amount 3.20
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) 08/14/17	Amount 3.20
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 Office Depot		Date (MM/DD/YYYY) 08/26/17	Amount 32.36
Street Address 1325 Polaris Parkway		Purpose Office Supplies	
City Columbus	State OH <input type="checkbox"/>	Zip Code 43240	Check Number Debit

Page Total \$ 41.11