



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee				
CHRIS AMOROSE GROOMES FOR DUBLIN				
To Whom Paid		Date (MM/DD/YYYY)	Amount	
THE HUNTINGTON NATIONAL BANK			3.00	
Street Address	Purpose			
P.O. BOX 1558 EA1W37	MONTHLY SERVICE FEE			
City	State Z	Zip Code Check Number		
COLUMBUS	ОН	13216	AUTO-DEBIT	
To Whom Paid	Date (MM/DD/YYYY) Amount		Amount	
THE HUNTINGTON NATIONAL BANK	07/16/2018 3.00		3.00	
Street Address	Purpose			
P.O. BOX 1558 EA1W37	MONTHLY SERVICE FEE			
City	State 2	Zip Code	Check Number	
COLUMBUS	он 4	43216	AUTO-DEBIT	
To Whom Paid	Date (MM/DD/YYYY) Amount			
THE HUNTINGTON NATIONAL BANK		08/15/2	08/15/2018 3.00	
Street Address	Purpose			
P.O. BOX 1558 EA1W37	MONTHLY SERVICE FEE			
City	State	Zip Code Check Number		
COLUMBUS	он	43216	AUTO-DEBIT	
To Whom Paid		Date (MM/DD/YYYY)	Date (MM/DD/YYYY) Amount	
THE HUNTINGTON NATIONAL BANK		09/17/2	09/17/2018 3.00	
Street Address	Purpose			
P.O. BOX 1558 EA1W37	MONTHLY SERVICE FEE			
City	State	Zip Code	Check Number	
COLUMBUS	он	43216	AUTO-DEBIT	
To Whom Paid	Date (MM/DD/YYYY) Amount			
THE HUNTINGTON NATIONAL BANK		10/12/2	018 3.00	
Street Address	Purpose			
P.O. BOX 1558 EA1W37	MONTHLY SERVICE FEE			
City	State	Zip Code	Check Number	
COLUMBUS	ОН	43216	AUTO-DEBIT	

Page Total	\$ ^{15.00}	