

JON HUSTED
Ohio Secretary of State



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Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee			
Walsh for Madison Township			
To Whom Paid		Date (MM/DD/YYYY)	Amount
Fifth Third Bank		10/12/2017	11.00
Street Address		Purpose	
P.O. Box 630900		Service Charge	
City	State	Zip Code	Check Number
Cincinnati	OH	45263	
To Whom Paid		Date (MM/DD/YYYY)	Amount
Columbus Messenger		11/03/2017	189.00
Street Address		Purpose	
3500 Sullivant Ave.		Advertising	
City	State	Zip Code	Check Number
Columbus	OH	43204	Debit Card
To Whom Paid		Date (MM/DD/YYYY)	Amount
Columbus Messenger		11/06/2017	189.00
Street Address		Purpose	
3500 Sullivant Ave.		Advertising	
City	State	Zip Code	Check Number
Columbus	OH	43204	Debit Card
To Whom Paid		Date (MM/DD/YYYY)	Amount
Fifth Third Bank		11/10/2017	11.00
Street Address		Purpose	
P.O. Box 630900		Service Charge	
City	State	Zip Code	Check Number
Cincinnati	OH	45263	
To Whom Paid		Date (MM/DD/YYYY)	Amount
Quality Graphic Services		10/30/2017	614.90
Street Address		Purpose	
6175 Diley Road		Signage	
City	State	Zip Code	Check Number
Canal Winchester	OH	43110	1001

Page Total \$ 1014.90