



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Monique Lampke			
To Whom Paid Monique Lampke		Date (MM/DD/YYYY) 10/30/17	Amount 334.76
Street Address 2447 Plymouth Av		Purpose Mail supplies, copies	
City Columbus	State OH	Zip Code 43209	Check Number 106
To Whom Paid Paypal		Date (MM/DD/YYYY) 10/30/17	Amount 2.48
Street Address 2211 N 1st St		Purpose Credit card processing fees	
City San Jose	State CA	Zip Code 95131	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 337.24