



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Franklin County Adelante Democrats			
To Whom Paid 5/3 Bank		Date (MM/DD/YYYY) 01/12/2017	Amount 14.00
Street Address PO Box 630900		Purpose Bank Fee	
City Cincinnati	State OH	Zip Code 45263	Check Number
To Whom Paid 5/3 Bank		Date (MM/DD/YYYY) 02/10/2017	Amount 14.00
Street Address PO Box 630900		Purpose Bank Fee	
City Cincinnati	State OH	Zip Code 45263	Check Number
To Whom Paid 5/3 Bank		Date (MM/DD/YYYY) 03/10/2017	Amount 14.00
Street Address PO Box 630900		Purpose Bank Fee	
City Cincinnati	State OH	Zip Code 45263	Check Number
To Whom Paid 5/3 Bank		Date (MM/DD/YYYY) 04/03/2017	Amount 5.00
Street Address PO Box 630900		Purpose Bank Fee	
City Cincinnati	State OH	Zip Code 45263	Check Number
To Whom Paid 5/3 Bank		Date (MM/DD/YYYY) 04/12/2017	Amount 14.00
Street Address PO Box 630900		Purpose Bank Fee	
City Cincinnati	State OH	Zip Code 45263	Check Number

RECEIVED  
 2018 MAR 30 PM 4:10  
 FRANKLIN COUNTY  
 BOARD OF ELECTIONS

Page Total \$ 61.00