PAYEE FIRST NAME	PAYEE MIDDLE NAME	PAYEE LAST NAME	SUFFIX	NON INDIVIDUAL PAYEE	PAYEE ADDRESS	CITY	STATE	ZIP	DATE OF EXPENDITURE	AMOUNT	PURPOSE	EVENT DATE	CANDIDATE OR BALLOT ISSUE (FORM 31U ONLY)	SUPPORT/ OPPOSE (1 if Support, 2 if Oppose)	OFFICE (FORM 31U ONLY)	EXPENDITURE CODE (FOR LOCAL PARTY USE ONLY)	ITEM NUMBER	SCHEDULE CODE (E, 31B)
				CORDRAY/SUTTON COMMITTEE	PO BOX 7910	COLUMBUS	OH	43207	3/20/2018	60.00	FOOD EXPENSE	3/15/2018						31J2
				CORDRAY/SUTTON COMMITTEE	PO BOX 7910	COLUMBUS	OH	43207	3/20/2018	172.00	FOOD EXPENSE	3/19/2018						31J2
				CORDRAY/SUTTON COMMITTEE	PO BOX 7910	COLUMBUS	OH	43207	3/26/2018	250.00	King Art Complex	3/20/2018						31J2
				CORDRAY/SUTTON COMMITTEE	PO BOX 7910	COLUMBUS	OH	43207	3/29/2018	100.00	King Art Complex	3/20/2018						31J2
										582.00								