

Da	te	02/20/2018	Page 1
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## Statement of Expenditures for Social or Fund-Raising Event

Form 31-F R.C. 3517.10

Full Name of Committee				<del> </del>
Committee to Elect McCaughan for Jud	dge			
To Whom Paid			Date (MM/DD/YYYY)	Amount
Lorie McCaughan			02/26/2018	\$1,490.54
Street Address	Purpose	Purpose		
1331 B Lake Shore Drive	reimb.	reimb. for Tony's Restaurant expense for fund raiser		
City	State	Zip Code	Check Number	
Columbus	он	43204	154	
To Whom Paid		<del></del>	Date (MM/DD/YYYY)	Amount
Street Address	Purpose	<u> </u>		
City	State	Zip Code	Check Number	An annual of the second of the
City	OH	Zip Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose	Purpose		
City	State	Zip Code	Check Number	
To Whom Paid		<u> </u>	Date (MM/DD/YYYY)	Amount
Street Address	Purpose	Purpose		
City	State	Zip Code	Check Number	
To Whom Paid	<u> </u>		Date (MM/DD/YYYY)	Amount
Street Address	Purpose	:		
City	State	Zip Code	Check Number	

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

Page Total \$
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