Statement of Loans Received



				Prescrit	ed by Sec	retary of	State 3/05				
Full Name of Committee COMMITTEE FOR THE	2014 0	OLUM	BUS Z	00 LI	EVY						
From Whom Received THE COLUMBUS ZOOLOGICAL PARK ASSOC					CIATION				ount 00		Amt. Incurred this Period \$200,000.00
Address 4850 POWELL ROAD											Outstanding Balance \$30,000.00
POWELL	St ate Zip Code 43065			Loans Received This Period Date Amount					Payments This Period Date Amount		
Date Loan was originally Incorred	м 0 4	^D 2 3	1 4	M 0 4	2 3	1 4	s \$200,000.00	0 6	1 2	1 4	\$ \$170,000.00
Registration Number, if PAC				М	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*			M	D	Y		M	D	Y		
From Whom Received				<u> </u>	<u> </u>	<u> </u>		Prior Am	ount		Amt. Incurred this Period
Address				•							Outstanding Balance
City	St ate OH	Zîp Code		Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred	М	D	۱	M	D	Y	S	M	D	Ý	s
Registration Number, if PAC		1	<u> </u>	М	D	Y		M	D	Y	
Employer/Occupation/Labor Organization	π*			M	D	Y		M	D	Y	
From Whom Received								Рпог Ат	iount		Amt. Incurred this Period
Address											Outstanding Balance
City	St ate OH	Zip Code		Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred	М	D)	M	D	Y	S	M	D	Y	S
Registration Number, if PAC				М	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*				M	D	Y		M	D	Y	
* Required for contributions from in	dividuals o	ver \$100 t	o statewic	le and g	eneral as	sembly	candidates. If contribu	tor is self-	employe	d, the oc	cupation and the name of

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Outstanding Balance to the Cover page (Form No. 30-A).

Total prior amount \$\$0.	00			
² Total received this period \$	\$200,000.00	(To Form No. 31-A-2)		
³ Total payments this period S	\$170,000.00	(To Form No. 31-B)		
⁴ Total Outstanding Balance S	\$30,000.00	(To Form No. 30-A		

the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]