Statement of Loans Received

Page ____

Prescribed by Secretary of State 3-05

			i resetto	ca ty sec	iciny (ii	THE P. ST.					
Full Name of Committee Citizens for Chris Long	<u>.</u>										
From Whom Received Sandra Long								ount 00.00		Amt. Incurred this Period \$0.00	
Address 1675 Haft Drive			-							Outstanding Balance \$2,000.00	
City Reynoldsburg	St ate OH	Zip Code 43068	Loans Received This Period Date Amount				Payments Date			This Period Amount	
Date Loan was originally Incurred	м 2 2	D Y 2 8 1 7	м 0 2	D 2 8	1 7	s \$2,000.00	М	D	Y	\$ \$0.00	
Registration Number, if PAC	•		M	D	Y		М	D	Y		
Employer/Occupation/Labor Organizat	ion*		М	D	Y		М	D	Y		
From Whom Received Chris Long							Prior Amount A \$0.00			Amt. Incurred this Period \$501.93	
Address 1675 Haft Drive										Outstanding Balance \$501.93	
Cոչ Reynoldsburg	Strate OH	Zip Code 43068	Loans Received This Period Date Amount				Payments This Period Date Amount				
Date Loan was originally Incurred	0 4	1 7 1 7	0 4	1 7	1 7	\$ \$409.24	M	D	7.	\$0.00	
Registration Number, if PAC			M 0 4	D 2 7	1 7	\$92.69	М	D	Y	\$0.00	
Employer/Occupation Labor Organization*			M	D	Y		M	D	Y		
From Whom Received				- I			Prior An	iount	_ 	Amt Incurred this Period	
Address										Outstanding Balance	
City	St ate OH	Zip Code	ı	Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred	М	D Y	М	D	Y	S	M	D	Y	\$	
Registration Number, if PAC				i)	Y		VI	D	Y		
Employer Occupation Labor Organization*			VI	1)	γ.		N	D	Υ'		
* Required for contributions from	individuals o	over \$100 to statew	ide and g	eneral as	sembly	candidates. If contrib	utor 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 \$ \$2,	000.00	
² Total received this period \$	\$501.93	(To Form No. 31-A-2)
³ Total payments this period \$ _	\$0.00	(To Form No. 31-B)
⁴ Total Outstanding Balance \$ _	\$2,501.93	(To Form No. 30-A

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of 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)]