2 Total received this period \$

3 Total Payments this Period \$

4 Total Outstanding Balance \$

	5
Page	J

Statement of Loans Received

				P	rescribed	by Secre	tary of St	ate3/05					
Full Name of Committee Barrows for Judge													
From Whom Received Ted Barrows								Prior Amount 53,175.00			Amt. Incurred this Period		
Address 4834 Sarasota Dr.												Outstanding Balance 53,175.00	
City Hilliard		1 4302	.6	Loans Received This Period Date Amount					Payments This Period Date Amount				
Date Loan was originally Incurred	0 9	$\begin{vmatrix} D \\ 3 \end{vmatrix} 0$	$\begin{vmatrix} \mathbf{Y} \\ 0 \end{vmatrix} 3$	М	D	Y	\$		M	D	Y	\$	
Registration Number, if PAC				М	D	Y			М	D	Y		
Employer/Occupation/Labor Organization*				М	D	Y			М	D	Y		
From Whom Received									Prior Ai	nount		Amt. Incurred this Period	
Address	***************************************		afection and anti-control anti-control anti-control anti-control anti-control anti-control	***************************************	e COORDANN AND A SIND COMMUNICATION COMM							Outstanding Balance	
City	State	Zip Coo	ie	Lo	Loans Received This Period Date Amount					Payments This Period Date Amount			
Date Loan was originally Incurred	М	D	Y	М	D	Y	\$		М	D	Y	\$	
Registration Number, if PAC	Lateratura de la companya de la comp La companya de la companya			М	D	Y			М	D	Y		
Employer/Occupation/Labor Organization*				М	D	Y			М	D	Y		
From Whom Received									Prior Amount Amt. Incurred this Period				
Address Outstanding Balance										Outstanding Balance			
City	State	Zip Coc	le	Lo	Loans Received This Period Date Amount					Payments This Period Date Amount			
Date Loan was originally Incurred	М	D	Y	М	D 	Y	\$		М	D	Y	\$	
Registration Number, if PAC				М	D	Y			М	D	Y		
Employer/Occupation/Labor Organization*				М	D	Y	o de la companya de l	000000000000000000000000000000000000000	М	D	Y		
* Required for contributions over \$100 to stif any, rather than employer should be listed the employees are members, if any, must apply that is forgiven, write "Forgiven" in the Transfer total of all payments made in this p	. If two opear, R.O	ormore em C. 3517.10 ading Bala	ployees do (B)(4) nce" space	onate via	payroll dec	duction a	nd excee	d the aggregate of \$10	00, the lab	or organiza	ation of w	hich No. 31-A-2).	
1 Total prior amount \$		53,1	75.00										

0.00 (To Form No. 31-A-2)

53,175.00 (To Form No. 30-A)

0.00 (also record on Form 31-B)