Page	1

Statement of Loans Received

Prescribed by Secretary of State3/05																				
Full Name of Committee				·																
Baker for the Board																			_	
From Whom Received													- 1	Prior	Ame			0.00	- 1	Amt. Incurred this Period
Gary Baker																5,1	UU	0.00		0.00
Address																				Outstanding Balance
2142 Staghorn Way		-	7' 0 1											. H	٠.	<u> </u>		ત, જ	_	4,000.00
City State Zip Code Loans Received This Period Payments This Period Grove City O H 43123 Date Amount Date Amount																				
Grove City Date Loan was originally	+	Щ) Гү	M		D D		Y	_	•	Amount		24			ate	Y	-	Amount
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Registration Number, if PAC	IUI	<u>6</u>	<u> </u>	1017	M		D		Y			 		0 M	2	D D	쉬	1 , Y	F	1000
Registration Number, if FAC					101		D		, 1					141				Ì	-	
Employer/Occupation/Labor Organization*					M	-	D		Y					М		D	\dashv	Y	╅	
Employer/occupations Labor Organization					"``		١		1				ı			Ĭ		Ī	1	
From Whom Received]			\dashv	Prior	Αm	ount	_	!-	+	Aint. Incurred this Period
Diane Wendel Baker															2 (111)		ሰር	0.00	•	0.00
Address						-		_	•			_			•	,				Outstanding Balance
2142 Staghorn Way																				2,000.00
City	Stat	te	Zip Code		Т	Loa	ns R	eceiv	ed TI	his P	eriod				•	<u> </u>		Pav	mei	nts This Period
Grove City	lot:	нΙ	43123	3 .	l			ate				Amount				D	ate			Amount
Date Loan was originally	М		D	Y	М		D		Y		S			М		D		Y	Ţ	§
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Registration Number, if PAC		•		•	M.		D		Y					M		D		Y	1	 -
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Employer/Occupation/Labor Organization*					М		D	_	Y					М		D	-	Y	T	
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From Whom Received Prior Amount Arnt. Incurred this Period																				
Address Outstanding Balance																				
City	Stat	te	Zip Code	2		Loa			ed Tl	his P	eriod							•	me	nts This Period
Data Laga was originally	1 1			1 77	1	. :	_	ate	V	_	· · · ·	Amount		3.6			ate		_	Amount
Date Loan was originally Incurred	М		D	Y	M		D	' 	Y		3			M				Y	ľ	>
Registration Number, if PAC	<u> </u>	لـــا	<u> </u>	<u> </u>	М	<u>'</u>	D	<u> </u>	Y		-			М		D		Y	┥	
Registration Publicet, if FAC					IVI	Ì	"	, 	' ₁					192		ľ		1	١	
Employer/Occupation/Labor Organization*					М	 	D	<u> </u>	Y Y					М		D.	-	Y	┪	
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* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business,																				
if any, rather than employer should be listed. If two ormore employees donate via payroll deduction and exceed the aggregate of \$100, the labor organization of which																				
the employees are members, if any, must appear. R.C. 3517.10(B)(4)																				
If a loan is forgiven, write "Forgiven" in the	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			-	-																

'ra	ansfer total of all payments made in this period to the Statement of Exp	enditures	(Form No. 31-B), Transfer Total Outstanding Balance to the cover page (Form No. 30-A).
1	Total prior amount \$ 7,000.00	_	
2	Total received this period \$	0.00	(To Form No. 31-A-2)

3 Total Payments this Period S 1,000.00 (also record on Form 31-B)

4 Total Outstanding Balance \$ 6,000.00 (To Form No. 30-A)