1 Total prior amount \$

2 Total received this period \$

3 Total Payments this Period \$

4 Total Outstanding Balance \$

Page	1

Statement of Loans Received

				Pro	escribed b	y Secreta	ary of Sta	ate3/05						
Full Name of Committee					and the property of the second				·	*********				
Burris for Trustree									(processors)	e de la constante de la consta				
From Whom Received							Prior Amount				Amt. Incurred this Period			
David Burris										SECONOCIO		0.00	5,000.00	
Address 4375 Shirlene Court													Outstanding Balance 5,000.00	
City	State	Zip Cod	е	Loans Received This Period						Payments This Period				
GroveCity	OH	4312	3	Date Amount					Date				Amount	
Date Loan was originally Incurred	M 1 ()	D 1 5	Y 0 9	M 1 0	D 1 5	Y 0 9	\$	5000	M	broad	D 2 9	Y 0 9	\$ 2276.76	
Registration Number, if PAC	<u> </u>	1 2 1 0		M	D	Y			М		D	Y 		
Employer/Occupation/Labor Organization*		<u></u>		М	D	Y			М		D	Y		
From Whom Received								Prior Amount				Amt. Incurred this Period		
Address													Outstanding Balance	
City	State	Zip Cod	e	Loans Received This Period Date Amount							Dat	-	ents This Period Amount	
Date Loan was originally Incurred	М	D	Y	M	D	Y	\$		М		D	Y	\$	
Registration Number, if PAC M						Y			М		D	Y		
Employer/Occupation/Labor Organization*					D	Y			М	HONIMAN	D	Y		
From Whom Received									Prior Amount Amt. Incurre				Amt. Incurred this Period	
Address												Outstanding Balance		
City	State	Zip Cod	le	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			М		D	Y		
* Required for contributions over \$100 to s if any, rather than employer should be listed the employees are members, if any, must ap If a loan is forgiven, write "Forgiven" in the Transfer total of all payments made in this payments.	i. If two opear. R. o "Outsta	ormore en C. 3517.10 nding Bala	nployees d D(B)(4) ance" spac	lonate via e, Transfe	payroll de er total of	duction a	and exce received	ed the aggregate of \$10 this period to the State	00, the	labo	or organiz other Inco	zation of w	which No. 31-A-2).	
1 Total prior amount \$		5,0	00.00											

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

2,276.76 (also record on Form 31-B)

Forgiven (To Form No. 30-A)