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Statement of Loans Received

				Pī	escribed b	y Secreta	ary of Sta	te3/05					
Full Name of Committee						-							
Citizens for Beryl Picc	olante	onio											
From Whom Received									Prior A	Amount			Amt. Incurred this Period
Andy Piccolantonio											19	99.43	0.00
Address 963 Riva Ridge Blvd.													Outstanding Balance 199.43
City	State	Zip Code	;	Lo	ans Recei	ed This	Period					Paym	ents This Period
Gahanna	ОН	43230)		Date			Amount	Date				Amount
Date Loan was originally	M	D	Y	Mį	Ð	Y	S		M	D)	Y	S
Incurred	0 7	212	1 5		1	1	1						
Registration Number, if PAC				М	D	Y			М	D) 	Y	
Employer/Occupation/Labor Organization*				М	D	Y			M	D	}	Y	
From Whom Received					<u> </u>	<u> </u>	1		Prior d	I Amount	1		Amt. Incurred this Period
						· · · · · · · · · · · · · · · · · · ·			1 1101 7	· anounn		0.00	2,188.33
Address													Outstanding Balance 2,188.33
City	State	Zip Code	;	Luans Received This Period Date Amount			Amount	Payments This Period Date Amount					
Date Loan was originally	М	D	Y	M!	D	Y	\$		мі	1 0	,	Υ	S
Incurred	10	210	1 5	1 0	210	1115	; 	2188.33				1 1	
Registration Number, if PAC		<u></u>		M	D	Y	1		М	C	ì	Y	
Employer/Occupation/Labor Organization*				М	D	Y	<u> </u>		М	C	 	Y	
From Whom Received					•				Prior /	Amount		<u> </u>	Aint. Incurred this Period
Address													Outstanding Balance
City	State	Zip Code		Loans Received This Period Date Amount			Payments This Period Date Amount						
Date Loan was originally	М	D	Y	М	D	Y	S		M	Г	,	Y	S
Incurred	ļ	1 1								1	1		
Registration Number, if PAC			•	М	D	Y	1		М	Е) 	Y	
Employer/Occupation/Labor Organization*				М	D	Y			М	C	 	Y	
* Required for contributions over \$100 to st		_	-				-	- ,					business,

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. 3	-[-A-2]
Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Total Outstanding Balance to the cover page (Form No. 3	30-A).

1	Total prior amount \$	199.43	
2	Total received this period \$	2,188.33	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	(also record on Form 31-1
4	Total Outstanding Balance \$	2,387.76	(To Form No. 30-A)

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)