## Statement of Loans Received

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Page		

			Prescribed by Secretary of State 3/05		
Full Name of Committee Ethical Revenue Initiati	ve Politica	al Action Comm	nittee		
From Whom Received  John Stewart			Prior Amount \$2,050.00	Amt. Incurred this Period	
Address 855 Bryn Mawr				A. A.	Outstanding Balance \$2,050.00
City Gahanna	OH Si ate	Zip Code 43230	Loans Received This Period Date Amount	Payments Date	This Period Amount
Date Loan was	0 6	1 5 0 6	M D Y	M D Y	
Registration Number, if PAC		<u> </u>	M D Y	M D Y	
Employer/Occupation/Labor Organiza	ation*		M - D Y	M D Y	
From Whom Received	-			Prior Amount	Amt. Incurred this Period
Address	-				Outstanding Balance
City	St atc OH	Zip Code	Loans Received This Period Date Amount	Payments Date	s This Period Amount
Date Loan was	М	D Y	M D Y S	M D Y	S
Registration Number, if PAC	!	<del>!</del>	M D Y	M D Y	
Employer/Occupation/Labor Organiz	ation*		M D Y	M D Y	
From Whom Received				Prior Amount	Amt. Incurred this Period
Address		•			Outstanding Balance
St ate Zip Code Los		Loans Received This Period  Date Amount	Payments This Period Date Amount		
Date Loan was originally Incurred	М	D Y	M D Y S	M D Y	S
Registration Number, if PAC		<u> </u>	M D Y	M D Y	
Employer/Occupation/Labor Organization*		M D Y	M D Y		
the individual's business, if any	, rather than e	employer should be I	ide and general assembly candidates. If contributed, if two or more employees contribute via must also appear. [R.C. 3517.10(B)(4)]	outor is self-employed, the c payroll deduction and excee	occupation and the name of ed the aggregate of \$100, th
If a loan is forgiven, write "F Income (Form No. 31-A-2). T Balance to the Cover page (F	Fransfer tota	il of all payments r	Balance" space. Transfer total of all loan nade in this period to the Statement of Ex	s received this period to to penditures (Form No. 31)	the Statement of Other -B). Transfer Outstandir

<sup>1</sup> Total prior amount S\$2,		
<sup>2</sup> Total received this period S	\$0.00	(To Form No. 31-A-2)
<sup>3</sup> Total payments this period \$ _	\$0.00	(To Form No. 31-B)
<sup>4</sup> Total Outstanding Balance S	\$2,050.00	(To Form No. 30-A