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Statement of Loans Received

				Pi	rescribed l	by Secre	tary c	of State3/05					
Full Name of Committee Friends of Marilyn Bro	าพฑ			-									
Friends of Marifyll Blowit From Whom Received Michelle Brown						P	Prior Amount 2,000.00			Amt. Incurred this Period			
Address 33985 Blue Heron Driv	ve										,		Outstanding Balance 2,000.00
City Solon	State	Zip Co		Lo	ans Recei Date	ved Thi	s Per	iod Amount			Dat	-	ents This Period Amount
Date Loan was originally Incurred.	м 0 7	D 1 (0 0 6	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	
From Whom Received Greg H. Brown									F	rior Ar		00.00	Amt. Incurred this Period
Address 3901 Superior Avenue													Outstanding Balance 1,000.00
^{City} Cleveland	State O F	Zip Co [441	14		ans Rece Date		is Per	iod Amount			Dat	е	ents This Period Amount
Date Loan was originally Incurred	м 0 8	1 D	7 0 6	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 Michael Brown	_							`.	I	rior Aı		00.00	Amt. Incurred this Period
Address 23200 Chagrin Blvd.													Outstanding Balance 5,000.00
^{City} Beachwood	State O F	Zip Co [441		Lo	oans Rece Date	ived Th	is Per	riod Amount			Da	te	nents This Period Amount
Date Loan was originally Incurred	м 0 9	D 1	3 0 6	M	D	Y	\$			М	D	Y 	\$
Registration Number, if PAC				M	D	Y		,		М	D	Y	
Employer/Occupation/Labor Organization*				М	D	Y				М	D	Y	
* 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 "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 period to the Statement of Expenditures (Form No. 31-B). Transfer Total Outstanding Balance to the cover page (Form No. 30-A).													
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1	Total prior amount \$	8,000.00	
2	Total received this period \$	0.00	_ (To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	_ (also record on Form 31-E
4	Total Outstanding Balance \$	8,000.00	(To Form No. 30-A)