

# Statement of Loans Received

Prescribed by Secretary of State 2/01

Full Name of Committee <b>Glaeden for Judge</b>																
From Whom Received <b>Carrie E. Glaeden</b>										Prior Amount <b>\$4,000.00</b>			Amt. Incurred this Period <b>0.00</b>			
Address <b>5142 Highland Meadows Drive</b>													Outstanding Balance <b>\$4,000.00</b>			
City <b>Hilliard</b>		State <b>OH</b>		Zip Code <b>43026</b>		Loans Received This Period					Payments This Period					
						Date		Amount			Date		Amount			
						M	D	Y	\$				M	D	Y	\$
										<b>0.00</b>						
Registration Number, if PAC						M	D	Y					M	D	Y	
Employer/Occupation/Labor Organization						M	D	Y					M	D	Y	
From Whom Received										Prior Amount			Amt. Incurred this Period			
Address													Outstanding Balance			
City		State		Zip Code		Loans Received This Period					Payments This Period					
						Date		Amount			Date		Amount			
						M	D	Y	\$				M	D	Y	\$
Registration Number, if PAC						M	D	Y					M	D	Y	
Employer/Occupation/Labor Organization						M	D	Y					M	D	Y	
From Whom Received										Prior Amount			Amt. Incurred this Period			
Address													Outstanding Balance			
City		State		Zip Code		Loans Received This Period					Payments This Period					
						Date		Amount			Date		Amount			
						M	D	Y	\$				M	D	Y	\$
Registration Number, if PAC						M	D	Y					M	D	Y	
Employer/Occupation/Labor Organization						M	D	Y					M	D	Y	
From Whom Received										Prior Amount			Amt. Incurred this Period			
Address													Outstanding Balance			
City		State		Zip Code		Loans Received This Period					Payments This Period					
						Date		Amount			Date		Amount			
						M	D	Y	\$				M	D	Y	\$
Registration Number, if PAC						M	D	Y					M	D	Y	
Employer/Occupation/Labor Organization						M	D	Y					M	D	Y	

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 Outstanding Balance to the Cover page (Form No. 30-A).

<sup>1</sup> Total prior amount \$ 4,000.00

<sup>2</sup> Total received this period \$ 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 \$ 4,000.00 (To Form No. 30-A)