

Statement of Loans Received

R.C. 3517.10

Full Name of Committe	e			· · · · · · · · · · · · · · · · · · ·	 . <u>-</u>		
Friends of Neal Whitmar	1						
From Whom Received					Prior Amount	Prior Amount Amt. Incurred this	
Philip N. Whitman						300.0	00
Street Address						Outsta	inding Balance
7916 Windrift PI					300.00		00
City	State	Zip Code					
Reynoldsburg	ОН	43068	Loans Received T	his Period	Payments This Period		
Date Loan was Originally Incurred (MM/DD/YYYY) 06/12/2019			Date of Loan (MM/DD/YYYY) 06/12/2019		Date of Payment (MM	I/DD/YYYY)	Amount
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM	I/DD/YYYY)	Amount
			06/17/2019	100.00			
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY) Amount		Amount
From Whom Received		-		<u> </u>	Prior Amount	Amt. Ir	ncurred this Period
Street Address						Outsta	nding Balance
City	State	Zip Code			D	4- 71:	
			Loans Received This Period		Payments This Period		
Date Loan was Originally Incurred (MM/DD/YYYY)			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM	/DD/YYYY)	Amount
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM	/DD/YYYY)	Amount
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY) Amount		Amount
* Required for contributions from name of the individual's busined aggregate of \$100, the labor on If a loan is forgiven, write "Forg (Form No. 31-A-2). Transfer tot Cover page (Form No. 30-A).	ss, if any, rati ganization of iven" in the "0	her than employer sl which the employee Dutstanding Balance	nould be listed. If two or more one of any must a see members, if any, must a see a space. Transfer total of all lo	employees contri lso appear. [R.C. ans received this	bute via payroll deduc 3517.10(B)(4)] period to the Stateme	tion and ex	r Income
Total Prior Amount \$ 0.0	0	······································					
Total Received This Peri	od \$ <u>300.0</u>	0	(also rec	(also record on Form 31-A-2)			
Total Payments Receive	d this Perio	od \$0.00	(also reco	(also record on Form 31-B)			
Total Outstanding Balance	0	(also reco	(also record on Form 30-A)				

(also record on Form 30-A)