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Statement of Loans Received

Prescribed by Secretary of State3/0:

mployer/Occupation/Labor Organization*	M D Y	3000	M	D	Y	\dashv	
Registration Number, if PAC	M D Y O 7 2 8 0 6	440.50	М	D	Y		
ncurred	071706	242.50	M	D	Y		\$
Columbus O H Date Loan was originally M D Y	Date D Y \$	Amount		Da	te		Amount
Columbus OH	Loans Received This Period				P	ayme	ents This Period
90 E. Mithoff Street							Outstanding Balance
Elizabeth Gill							- min mounted and I cited
From Whom Received	V / 2 0 U 0		Prior An	nount			Amt. Incurred this Period
Simpleyor/Occupation/Labor Organization*	M D Y O 7 2 8 0 6	1326.55	M	D	Y		
Employer/Occupation/Labor Organization*	070506	72	IVI		1		(
Registration Number, if PAC	0 7 1 3 0 6 M D Y	293.56	M	D	Y		(
Date Loan was originally M D Y	M D Y \$	000	M	D	Y		\$
Columbus O H 43206	Loans Received This Period Date	Amount		Da		aym	ents This Period Amount
City State Zip Code	I I I I I I I I I I I I I I I I I I I						
Address 90 E. Mithoff Street							Outstanding Balance
Elizabeth Gill			Prior A	mount			Amt. Incurred this Period
From Whom Received	0 9 2 1 0 6	400.84					
Employer/Occupation/Labor Organization*	0 9 1 2 0 6 M D Y	6400.00	M	D	+,	7	
rogistiation reminer, if PAC	M D Y O 6	(400.00	М	D	7	Y	
Incurred Registration Number, if PAC	080706	112.52	М	D		Y	\$
Columbus O H 43206 Date Loan was originally M D Y	Date M D Y S	Amount	12		ate		Amount
City State Zip Code Columbus O H 43206	Loans Received This Period	***				Pavn	23,435.73
90 E. Mithoff Street							Outstanding Balance
Elizabeth Gill Address	· · · · · · · · · · · · · · · · · · ·				811.	.05	
From Whom Received			Prior A	mount			Amt. Incurred this Period
GILL FOR JUDGE							

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 (Farm No. 21 A 2)
Transfer total of all nauments made in this posicides the Course CT	1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-I	B). Transfer Total Outstanding Balance to the cover page (Form No. 30.4)

1	Total prior amount \$	3,811.05	
2	Total received this period \$	19,624.68	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	_ (also record on Form 31-B
4	Total Outstanding Balance \$	23,435.73	(To Form No. 30-A)

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)