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Statement of Loans Received

Prescribed by Secretary of State 2/01

····					_								
Full Name of Committee CTTIZENS FOR RANKIN	.I											· · · · · · · · · · · · · · · · · · ·	
From Whom Received	<u> </u>								In.: (Amount		16	
MIKE R. RANKIN									Prior A		150.00	Amt. Incurred this Per	
Address				-					-	i 1,	150.00	Outstanding Balance	0.00
2432 WYNCOURTNEY (<u> </u>									_	50.00
City		Zip Cod		Lo	ans Rece	ived Ti	is Perio	d			Payme	ents This Period	-
POWELL		4306:		Date Amount					Date			Amount	
Date Loan was originally incurred	M 0 9	2 0	0 4	"	Đ	Y 	s		М	D	Y	S	
Registration Number, if PAC				М	D	Y			М	0	Ý		
Employer/Occupation/Labor Organizatio	U,			м	D	Ý			M	0	Ý		
From Whom Received				1	<u> </u>	<u> </u>		·	Prior A	mount :	1. !	Amt, incurred this Per	ind
AVIS M. RANKIN									1		290.62	And Decores and 1 ca	0.00
Address												Outstanding Balance	
806 LAKE STREET												FORG	IVEN
City		Zip Cod		اما	Loans Received This Period					Payments This Period			
MARBLEHEAD		43440)	<u> </u>	Date			Amount	Date			Amount	
Daile Loan was originally	M () 4	0 8	0 4 A	×	D	Y	\$		М	D	Ϋ́	\$	
Registration Number, if PAC				М	D	Ý		· · · · · · · · · · · · · · · · · · ·	М	D	Ý		
Employer/Occupation/Labor Organization	n*			м	D	Ÿ			-	D	Y		
From Whom Received					<u></u>	!			Prior A	mount	<u>' '</u>	Amt. Incurred this Peri	od
									1				
Address												Outstanding Balance	
City State Zip Code			Loans Received This Period				Payments This Period						
					Date			Amount	1	Date	-	Amount	
Date Loan was originally incurred	×	D	Y	×	D	Y	\$		М	D	Y	\$	
Registration Number, if PAC	·			X	D	Ý			M	D	Ý		
Employer/Occupation/Labor Organization	n*			Z	Đ	Ÿ			M	D	Ý		
	-			<u>!</u>	<u> </u>	<u>- ! </u>	<u> </u>		1 !	<u>; ;</u>	!!!		

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).

•	Total prior amount \$	108,440.62		
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-B)
:	Total Outstanding Balance \$	11,1:	50.00	(To Form No. 30-A)