FOR PAPER FILING ONLY

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Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee											
Friends of Marilyn Bro	าพท										
From Whom Received	74411							Prior Am	ount		Amt. Incurred this Period
Nita Brown								ł	5,0	00.00	0.0
Address							 _				Outstanding Balance
26600 George Zieger I)rive, #40)5									5,000.0
City	State Zip Co		Loa	ns Receive	d This Pe	riod				Pay	ments This Period
Beachwood	O H 441	22	.	Date			Amount	<u> </u>	Dat	e	Amount
Date Loan was originally Incurred	M D D 0 6 2	1 0 6	М	D	Y	s		M	D	Y	S
Registration Number, if PAC			M	D	Y			М	D	Y	
Employer/Occupation/Labor Organization*			М	D	Y			М	D	Y	
From Whom Received								Prior Am	ount		Amt. Incurred this Period
Nita Brown									1,0	00.00	0.0
Address											Outstanding Balance
26600 George Zieger I)rive, #4()5									1,000.0
City	State Zip Co		Loa	ns Receive	d This Pe	riod		ł	_	•	ments This Period
Beachwood	O H 441			Date			Amount		Dat		Amount
Date Loan was originally	M D	Y	M	D	Y	s		M !	D	Y	3
Incurred	1 1 0	3 0 6	М	D	Y	 		М	D	Y	
Registration Number, if PAC			M		1	1		IM			
Employer/Occupation/Labor Organization*			М	D	Y			М	D	Y	
From Whom Received					<u></u>			Prior Am	ount		Amt. Incurred this Period
Michael C. Brown								l	5,0	00.00	0.0
Address											Outstanding Balance
23200 Chagrin Blvd											5,000.0
^{Ciy} Beachwood	State Zap Co		Loans Received This Period Date Amount		Payments This Period Date Amount						
Date Loan was originally	М D	Y	M	T D	Y	Is		M	D	Y	
Incurred	0 9 1	3 0 6				\perp					
Registration Number, if PAC			М	D	Y			М	D	Y	
Employer/Occupation/Labor Organization*			М	D	Y	T		М	D	Y	
<u> </u>	de and control aco		<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).

1	Total prior amount \$	11,000.00	
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-B
4	Total Outstanding Balance \$	11,000.00	(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 individuals 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)