



Total Outstanding Balance \$ 1,300.00

## **Statement of Loans Received**

Form 31-C

R.C. 3517.10

Full Name of Committee			· ·				•		
David Young for Judge Cor	nmittee					•	*		
From Whom Received	· · ·				·	Prior Amount	Amt. I	ncurred this Period	
David C Young					•	0.00	1,300	0.00	
Street Address							Outsta	nding Balance	
6100 Wynford Drive							1,300	0.00	
City Dublin	State OH	Zip Code 43017	Loans Received	I TI	nis Period	Payments This Period		Period	
Date Loan was Originally	Incurred (	MM/DD/YYYY)	Date of Loan (MM/DD/YY)	Υ)	Amount	Date of Payment (Mi	//DD/YYYY)	Amount	
		02/05/2019	02/05/20	19	1,200.00			}	
Registration Number, if PAC			Date of Loan (MM/DD/YY) 02/21/20		Amount 100.00	Date of Payment (MI	//DD/YYYY)	Amount	
Employer/Occupation/Labor Organ	nization*		Date of Loan (MM/DD/YY)			Date of Payment (MM	M/DD/YYYY)	Amount -	
	<u> </u>								
From Whom Received	٠,					Prior Amount	Amt. Ir	ncurred this Period	
Street Address							Outsta	nding Balance	
City	y State Zip Code			Loans Received This Period			Payments This Period		
Date Loan was Originally	Incurred (	MM/DD/YYYY)	Date of Loan (MM/DD/YYY	Υ)	Amount	Date of Payment (Mi	M/DD/YYYY)	Amount	
Registration Number, if PAC		·	Date of Loan (MM/DD/YYY	Υ)	Amount	Date of Payment (MM	M/DD/YYYY)	Amount	
							•		
Employer/Occupation/Labor Orgar	nization*	· ,	Date of Loan (MM/DD/YYY	Υ)	Amount	Date of Payment (MM	M/DD/YYYY)	Amount	
<del> </del>	-	<u>.</u>						<u> </u>	
* Required for contributions from in name of the individual's business, i aggregate of \$100, the labor organ If a loan is forgiven, write "Forgiven	f any, rath ization of	er than employer sh which the employee	hould be listed. If two or moses are members, if any, must	re e st al	employees contrib so appear. [R.C. 3	ute via payroll deduc 3517.10(B)(4)]	tion and ex	cceed the	
(Form No. 31-A-2). Transfer total o Cover page (Form No. 30-A).									
Total Prior Amount \$ 0.00		· · · · · · · · · · · · · · · · · · ·	·						
Total Received This Period	(also	(also record on Form 31-A-2)							
Total Payments Received th	nis Perio	d \$ <u>0.00</u>	(also r	eco	rd on Form 31-B)				

(also record on Form 30-A)