31-C R.C. 3517.10

## **Statement of Loans Received**

Page	 	

Prescribed by Secretary of State 3/0

		Prescribed by Secretary of State 3/03			
Full Name of Committee Hennessy for Columbus					
From Whom Received Hennessy, Daryl P.			Prior Amount \$7,000.00	Amt. Incurred this Period \$0.00	
Address 2965 Palmetto Street	\$	Outstanding Balance Forgiven			
City Columbus	Strate Zip Code OH 43204	Loans Received This Period Date Amount	Payments Date	This Period Amount	
Date Loan was originally Incurred Registration Number, if PAC	0 8 0 3 1 1	M D Y S  M D Y	M D Y <sub>1</sub>	\$	
Employer/Occupation/Labor Organizati	ion*	M D Y	M D Y		
From Whom Received Hennessy, Daryl P.		1	Prior Amount \$10,000.00	Amt. Incurred this Period \$0.00	
Address 2965 Palmetto Street			,	Outstanding Balance Forgiven	
City Columbus	State Zip Code OH 43204	Loans Received This Period Date Amount	Payments Date	This Period Amount	
Date Loan was	0 3 0 1 1 1 1	M D Y S	M D Y	\$	
Registration Number, if PAC		M D Y	M D Y		
Employer/Occupation/Labor Organizat	ion*	M D Y	M D Y		
From Whom Received Hennessy, Daryl P.			Prior Amount \$5,000.00	Amt. Incurred this Period \$0.00	
Address 2965 Palmetto Street				Outstanding Balance Forgiven	
City Columbus	St ate Zip Code OH 43204	Loans Received This Period Date Amount	Payments Date	This Period Amount	
Date Loan was	0 1 2 1 1	M D Y S	M D Y	\$	
Registration Number, if PAC		M D Y	M D Y		
Employer/Occupation/Labor Organization*		M D Y	M D Y		
* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of					

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 Outstanding Balance to the Cover page (Form No. 30-A).

Total prior amount \$ \$22,000.00	
<sup>2</sup> Total received this period \$\$0.00	(To Form No. 31-A-2)
Total payments this period \$\$0.00	(To Form No. 31-B)
<sup>4</sup> Total Outstanding Balance \$ \$0.00	(To Form No. 30-A)

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]