Statement of Loans Received

Prescribed by Secretary of State3/05

E WY												
Full Name of Committee Citizens for Yassenoff												
From Whom Received					-				Prior A	nount		Amt, Incurred this Period
Erik Yassenoff								7710171	3,000.00		0.00	
Address					-			· · · · · ·		0,00	30.00	Outstanding Balance
1990 Hampshire Road												3,000.0
City	State	Zip Code	:	Loa	Loans Received This Period Payr						Pavm	ents This Period
Upper Arlington		43221		Date Amount			1	Date Amount				
Date Loan was originally	M	D	Y	M	D	Y	S		M	D	Y	S
Incurred	0 8	0 6	0 7								1	
Registration Number, if PAC				М	D 	Y			М	D 	Y	
Employer/Occupation/Labor Organization*				M	D i	Y			М	D	Y	
From Whom Received		٠	•		<u> </u>				Prior A	mount	<u> </u>	Amt. Incurred this Period
Address			-			_						Outstanding Balance
City	State	Zip Code	:	Loa						ents This Period		
	1	<u> </u>			Date		Te	Amount	3.41	Date	e I y	Amount
Date Loan was originally	M	D	Y	М	D	Y	3		M	D	i '	3
Incurred Registration Number, if PAC				M M	D	Y	∔		M M	D	Y	
Registration Number, it FAC				1 11	Ι'n	Ι'n	1		,	Ιí	li	
Employer/Occupation/Labor Organization*				М	D 	Y			M	D 	Y	
From Whom Received		• •	-		<u>'</u>	''			Prior A	mount		Amt. Incurred this Period
Address												Outstanding Balance
City	State Zip Code Loans Received This Period Date Amou					Amount	Payments This Period Date Amount					
Date Loan was originally	M	D	Y	M	D	Y	S		M	D	Y	S
Incurred												
Registration Number, if PAC			М	D 	Y			M	D	Y		
Employer/Occupation/Labor Organization*		•		M	D	Y			M	D	Y	
				<u> </u>	<u>. ' </u>	<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 \$	3,000.00	
2	Total received this period \$	0.00	_ (To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	_ (also record on Form 31-1
4	Total Outstanding Balance \$	3,000.00	_ (То Fолп No. 30-А)

^{*} 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)