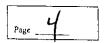
Statement of Loans Received



Prescribed by Secretary of State 3/05

Full Name of Committee MCTutTVSH	Cot.	Jus	16t			·····			_	_		
Full Name of Committee MCTutTOSH FOR JUDGE From Whom Received STEPHEN L. M GUTTOSH									onount PA.	W	Aint, Incurred this Period	
Address							;	2 a	0		Outstanding Balance	
City	State Zip Code OH			Loans Received This Period Date Amount				- Salas	Payments This Period			
Date Loan was	М	D	Y:	M	D	Y ₁	\$	M	Date D	Y	Amount \$	
originally Incurred Registration Number, if PAC				M	D	Y		M	D	Y.		
Employer/Occupation/Labor Organization*				M	D	Y;	: :		D	Y		
From Whom Received							<u>L </u>	Prior A	mount		Amt, Incurred this Period	
Address								15° 11' 11' 11'	Service	₹ 7 . °	Outstanding Balance	
Dity	St ate Zip Code			Loans Received This Period Date Amount					Payments This Period Date Amount			
Date Loan was originally Incurred Registration Number, if PAC	MÉ :	D	Y.	M M	D D	Y	S	M,	D	Y	Amount	
Employer/Occupation/Labor Organization*					D	Y		M	D	Ÿ		
rom Whom Received				1	<u> </u>			Prior A	mount	<u> </u>	Amt. Incurred this Period	
Address	 -		····			·				100 m m m m m m m m m m m m m m m m m m	Outstanding Balance	
Tiry	State Zip Code OH			Loans Received This Period Date Amount				Payments This Period Date Amount				
Date Loan was originally Incurred Registration Number, if PAC	M	D	Ÿ.	M M	D,	Y Y	\$	M _,	D D	Y	Amount \$	
Employer/Occupation/Labor Organization*				М	D	Y		M	D	Y		
Required for contributions from the individual's business, if any, labor organization of which the e	rather than ei	nployer s	hould be I	isted. If t	wo or m	ore emp	loyees contribute vi	ibutor is sel a payroll de	f-employ duction a	ed, the o	ocupation and the name of d the aggregate of \$100, the	
a loan is forgiven, write "Foncome (Form No. 31-A-2). Tralance to the Cover page (Fo	rgiven" in t ansfer total	he "Outs of all pa	standing	Balance	" space	Trans	fer total of all loa	ns received xpenditure	d this per s (Form	riod to tl No. 31-	ne Statement of Other B). Transfer Outstandin	
Total prior amount \$		769	8,20	İ								
Total received this period \$_	\$0.00	·		_ (To Fo	orm No	.31-A-	2)					
Total payments this period \$	otal payments this period \$ \$0.00 (To Form No. 31-B)											
Total Outstanding Balance \$			698.	20	(To For	m No.	30-A)					