



Statement of Loans Received

Form 31-C

R.C. 3517.10

E-0.N 5.0			····					
Full Name of Committee FUR DUBLIN								
From Whom Possived	Prior Amount Amt. Incurred this Peri		an and this Deviced					
Com con	0.	- LOCKN						
CREGRAM PETERSON Street Address						0	500.06	
0 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								nding Balance
								DD - DD
City	State	Zip Code	_		**	_	_	
DUBLIN	ОН	43017	Loans Received This Period			Payments Received This Period		
Date	of Original Loar	(MM/DD/YYYY)	Date of Loan (MM/	DD/YYYY)	Amount	Date of Payment (MM/D	D/YYYY)	Amount
	29/14	2017						
Registration Number, if PAC			Date of Loan (MM/	DD/YYYY)	Amount	Date of Payment (MM/D	D/YYYY)	Amount
			Take of County, min			Jacob St. Adyment (Minus)	,	, and and
Employer/Occupation/Labor	Data at Lass (1414	(DDAAAAA	Amount					
}	Date of Loan (MM/	(ייייטט/יייטט	Amount	Date of Payment (MM/D	ID/YYYY)	Amount		
From Whom Received			<u></u>			Prior Amount	Amt ir	ocurred this Period
						THOI AMOUNT	Airit. II	iculted this r ellod
Street Address							Outsta	nding Balance
							Outsta	nong Balance
City	State	Zip Code						
	OH Loans Received				This Period Payments Received This Period			
Date	Date of Loan (MM/DD/YYYY) Amount		Date of Payment (MM/DD/YYYY) Amount					
Registration Number, if PAC	Date of Loan (MM/DD/YYYY) Amount		Date of Payment (MM/DD/YYYY) Amount		Amount			
·	Date of Essir (MINDS) 1111)			Bate of Faying in (William)	<i>D</i> /1711)	, anount		
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY) Amount		Amount	Date of Payment (MM/DD/YYYY) Amor		Amount
						1		
* 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)] 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 \$ _	٥							
Total Received This Pe		(also record on Form 31-A-2)						
Total Payments Received this Period \$				_ (also record on Form 31-B)				
Total Outstanding Balance \$ 500 \cdot 00				(also record on Form 30-A)				