Statement of Loans Received

Page	

Full Name of Committee		•									
Friends of Cortez Boga	ırd										
From Whom Received					-			Prior An			1.7
Cortez Lee Bogard							\$0.			Amt. Incurred this Period \$39,024.00	
Address 379 W. 4th Ave					•	*****					Outstanding Balance \$39,024.00
City Columbus	St ate OH	1 1 '			Loans Received This Period Date Amount				Date	This Period Amount	
Date Loan was originally Incurred	0 2	0 3	1 2	м 0 2	0 3	1 2	\$ \$39,024.00	M	D	Y	\$ \$0.00
Registration Number, if PAC	· · · · · · · · · · · · · · · · · · ·			M	D	Y		M	D	Y	<u> </u>
Employer/Occupation/Labor Organization* Bogard Insurance & Financial Services Inc.				M	D	Y		M	D	Y	
From Whom Received Cortez Lee Bogard				*					Prior Amount Amt. Incurred this \$0.00 \$11,500.0		
Address 379 W. 4th Ave											Outstanding Balance \$11,500.00
City Columbus	St ate OH	Zip Cod 43201		Loans Received This Period Date Amount			Payments This Period Date Amount				
Date Loan was originally Incurred	0 2	2 2	1 2	м 0 2	D 2 2	Y 1 2	s \$11,500.00	M	D	Y	\$ \$0.00
Registration Number, if PAC		L .	······································	М	D	Y		M	D	Y	
Employer/Occupation/Labor Organization* Bogard Insurance & Financial Service Inc				M	D	Y		M	D	Y	
From Whom Received		•	<u> </u>		<u> </u>			Prior Am	-1 IOURIT	1	Amt. Incurred this Period
Address				<u> </u>	,, , , , , , , , , , , , , , , , , , ,				:	•	Outstanding Balance
Zity	St ate OH	Zip Cod	2		Loan	s Receiv	ed This Period			² 2yments	This Period
Date Loan was originally Incurred	M	D	Y	M	D	Y	Antouri \$	M	Date D	Y	Amount \$
Registration Number, if PAC	l	L.,	<u>.l. </u>	M	D	Y.		M	D	Y	
Employer/Occupation/Labor Organization*				M _.	D	Y		M	Ď	Y	
Required for contributions from the individual's business, if any,	, rather than em	ployer sl	rould be lis	ited. If tw	vo or me	re empl	loyees contribute via p	uor is self- ayтoll ded	employe action an	d, the oco d exceed	cupation and the name the aggregate of \$100,

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 \$\$0.	00	
² Total received this period \$	\$50,524.00	(To Form No. 31-A-2)
³ Total payments this period \$ _	\$0.00	(To Form No. 31-B)
⁴ Total Outstanding Balance \$ _	\$50,524.00	(To Form No. 30-A)

ion of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]