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Statement of Loans Received

				Pre	scribed b	y Secreta	ary of St	ate3/05				
Full Name of Committee	· · · · · · · ·						····	· · · · · · · · · · · · · · · · · · ·				
Citizens for Rachael I	Doroth	ıy										
From Whom Received					Ì		Prior An		^ -	Amt. Incurred this Period		
Rachael Dorothy										1,7	97.12	0.00
Address 179 Kenbrook Drive									Outstanding Balance 1,797.12			
^{City} Worthington	State OH	Zip Code 43085		Loa	ns Receiv Date	ed This	Period	Amount		Dat	e .	ents This Period Amount
Date Loan was originally	M	D	Y	M	D	Y	\$		М	D	Y	\$
Incurred	0 8	0 1	1 1		1	<u> </u>				<u> </u>	<u> </u>	
Registration Number, if PAC				M	D 	Y 			M	D 	Y	
Employer/Occupation/Labor Organization*	•			М	D	Y 			М	D	Y	
From Whom Received					<u>* </u>	····			Prior An	ount		Amt. Incurred this Period
Address						·				:		Outstanding Balance
City	State	Zip Code		Loz	ns Receiv Date	ved This	Period	Amount		Dat	•	ents This Period Amount
Date Loan was originally Incurred	М	D 	Y 	М	D	Y	\$		М	D	Y	
Registration Number, if PAC	.1 <u>i</u>		· · · · · · · · · · · · · · · · · · ·	М	D	Y			М	Ď	Y	
Employer/Occupation/Labor Organization*			M	D	Ý			М	D	Y		
From Whom Received						Prior An	Prior Amount Amt. Incurred this Period					
Address									Outstanding Balance			
City	State	Zip Code	;	Loa	ns Recei	ved This	Period				•	ents This Period
			,		Date	T :-		Amount		Dat		Amount
Date Loan was originally Incurred	M	D	Y	М	D	Y	\$		М	D	Y	,
Registration Number, if PAC				М	D	Y			М	Đ	Y	
Employer/Occupation/Labor Organization	*		•	М	D	Y			М	Đ	Y	
* Required for contributions over \$100 to if any, rather than employer should be liste the employees are members, if any, must a If a loan is forgiven, write "Forgiven" in the	ed. If two o	ormore emp C. 3517.10	ployees d (B)(4)	onate via j	payroll de	duction a	and exce	ed the aggregate of	\$100, the lab	or organiz	zation of w	hich
Transfer total of all payments made in this	period to	the Statem	ent of Ex	penditures	(Form N	o. 31-B).	Transfe	r Total Outstanding	Balance to t	he cover p	age (Form	n No. 30-A).

1	Total prior amount \$	1,797.12		
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	I
4	Total Outstanding Balance \$	1,797.12	(To Form No. 30-A)	