

# Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>BEATTY FOR JUDGE</b>												
From Whom Received <b>Laurel A. Beatty</b>								Prior Amount <b>500.00</b>		Amt. Incurred this Period <b>0.00</b>		
Address <b>269 E. Gates St.</b>										Outstanding Balance <b>500.00</b>		
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43206</b>		Loans Received This Period Date Amount			Payments This Period Date Amount			
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
1		0	0	6	0	9						
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	
From Whom Received <b>Laurel A. Beatty</b>								Prior Amount <b>100.00</b>		Amt. Incurred this Period <b>0.00</b>		
Address <b>269 E. Gates St.</b>										Outstanding Balance <b>100.00</b>		
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43206</b>		Loans Received This Period Date Amount			Payments This Period Date Amount			
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
1		0	2	2	0	9						
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	
From Whom Received <b>Laurel A. Beatty</b>								Prior Amount <b>100.00</b>		Amt. Incurred this Period <b>0.00</b>		
Address <b>269 E. Gates St.</b>										Outstanding Balance <b>100.00</b>		
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43206</b>		Loans Received This Period Date Amount			Payments This Period Date Amount			
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
1		1	3	0	0	9						
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	

\* 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 or more 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)

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).

- Total prior amount \$ 700.00
- Total received this period \$ 0.00 (To Form No. 31-A-2)
- Total Payments this Period \$ 0.00 (also record on Form 31-B)
- Total Outstanding Balance \$ 700.00 (To Form No. 30-A)