31-C R.C. 3517.10

FOR PAPER FILING ONLY

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Statement of Loans Received

Prescribed by Secretary of State 3/05

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Full Name of Committee Committee to Elect Ar	drea Peeples for										
From Whom Received Calvin Peeples						Prior Amount \$18,000.00			Amt. Incurred this Period \$0.00		
Address 6401 Stoll Lane									Outstanding Balance \$18,000.00		
^{City} Cincinnati	St ate Zip Code OH 45236	Loans Received This Period Date Amount				Payments This Period Date Amount					
Date Loan was originally Incurred Registration Number, if PAC	0 3 1 6 0 5	M	D	Y	\$	M	D	Y	\$		
Employer/Occupation/Labor Organization*			D	Y		М	D	Y			
From Whom Received		1. 1.		1		Prior Am	ount	1 !	Amt. Incurred this Period		
Address		<u> </u>							Outstanding Balance		
City	State Zip Code			Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred Registration Number, if PAC	M D Y	M	D	Y	\$	M	D	Y	\$		
Employer/Occupation/Labor Organization*			D	Y		M	D	Y			
From Whom Received						Prior Am	ount		Amt. Incurred this Period		
Address									Outstanding Balance		
City	St ate Zip Code	Loans Received This Period				Payments This Period					
Date Loan was originally Incurred	M D Y	M	Date D	Y	Amount \$	М	Date	Y	Amount		
Registration Number, if PAC		М	D	Y		М	D	Y			
Employer/Occupation/Labor Organization*		М	D	Y		М	D	Y			
Required for contributions from in the individual's business, if any, ra labor organization of which the en	ther than employer should be li	sted. It	f two or m	ore emp	ployees contribute via p	utor is self- payroll ded	employ uction a	ed, the oc and exceed	cupation and the name of the aggregate of \$100, th		
f a loan is forgiven, write "Forg ncome (Form No. 31-A-2). Tra Balance to the Cover page (For	nsfer total of all payments n	Balanc nade in	ce" space n this per	. Trans iod to t	sfer total of all loans the Statement of Exp	received enditures	this per (Form	riod to th No. 31-E	e Statement of Other 3). Transfer Outstandin		
Total prior amount \$\$1	8,000.00										
Total received this period \$	\$0.00	_ (To]	Form No	. 31-A	-2)						
otal payments this period \$ (To Form No. 31-B)											
¹ Total Outstanding Balance \$	otal Outstanding Balance \$ \$18,000.00 (To Form No. 30-A)										