Statement of Loans Received

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Page		

Prescribed by Secretary of State 3/05

Full Name of Committee											i i
Ron Chesshir for Pleasant	Townsh	ip Trust	tee								
From Whom Received Ronald L. Chesshir					Prior An \$80	nount 00.00		Amt. Incurred this Period \$0.00			
Address 6021 Grove City Road											Outstanding Balance FOR611 GN
City Grove City	St ate OH	Zip Code 43123		Loans Received This Period				Payments This Period			
GIOVO OILY	М	D D	Y	M D	ate	Y	Amount	M	Date D	Y	Amount §\$
Date Loan was originally Incurred	0 9	3 0	0 9					1 1	1 3	0 9	\$51.23
Registration Number, if PAC				М	D	Y		М	D	Y	
Employer/Occupation/Labor Organization* Candidate - Retired Columbus Police Officer			М	D	Y		М	D	Y		
From Whom Received Prior Amount					Amt. Incurred this Period						
Address					MO THE STREET,						Outstanding Balance
City	State OH	Zip Code		D	Loan:	s Recei	ved This Period Amount		I Date	ayments	T his Period Amount
Date Loan was originally Incurred	M	D	Y	М	D	Y	\$	М	D	Y	\$
Registration Number, if PAC	kaominina amin'ny fivondronan-kaominina	h		М	D	Y		М	D	Y	
Employer/Occupation/Labor Organization	1*	***************************************		М	D	Y		М	D	Y	
From Whom Received								Prior Ar	mount	Laurania	Amt. Incurred this Period
Address						ewine and and and					Outstanding Balance
City	St ate OH	Zip Code		Б	Loans Received This Period Date Amount			Payments This Period Date Amount			
Date Loan was originally Incurred	М	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC				М	D	Y		М	D	Y	
Employer/Occupation/Labor Organization	1*			М	D	Y		M	D	Y	
* Required for contributions from inc									f-employe		

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 \$ \$8	00.00		
² Total received this period \$	\$0.00	(To	Form No. 31-A-2)
³ Total payments this period \$	\$51.23		(To Form No. 31-B)
⁴ Total Outstanding Balance \$]	\$0.00	FORGIVEN	(To Form No. 30-A)

^{*} 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)]