



Statement of Loans Received

Form 31-C

R.C. 3517.10

Full Name of Committee			3 - 44 - 44 - 44 - 44 - 44 - 44 - 44 -				T	
mularski i	For	Gaha	nna					
From Whom Received						Prior Amount	Arnt. in	curred this Period
Ray Mularski						500,00		
Street Address 183 CTECKSIDE GTCC City State Zin Code						Outstanding Balance		nding Balance
183 GEEK	<u>en</u>				9	CC,		
Carrina	* AND ADDRESS	व्यक्त व्यक्तव	Loans Received This Period			Payments This Period		
Date Loan was Originally Incurred (MM/DD/YYYY)		Date of Loan (MM/DD/YYYY) Amount		Date of Payment (MM/DD/YYYY) Amount		~~/3		
A CONTRACTOR OF THE CONTRACTOR	29]	2019				12/11/0	09	500
Registration Number, if PAC	,		Date of Loan (MM/DD	YYYY)	Amount	Date of Payment (MM/D	D(YYYY)	Amount
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD	www)	Amount	Date of Payment (MM/D	DYYYY)	Amount
From Whom Received						Prior Amount Amt. Incurred this		curred this Period
Street Address							Outsta	nding Balance
City	State	Zip Code	Loans Received This Period			Payments This Period		
Date Loan was Originally	Date of Loan (MM/DD/YYYY) Amou		Amount	Date of Payment (MM/DD/YYYY)		Amount		
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)		Amount	Date of Payment (MM/DDYYYY)		Amount
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)		Amount	Date of Payment (MM/DD/YYYY)		Amount
* 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								
name of the individual's business, i aggregate of \$100, the labor organ	f any, rath ization of	er than employer s which the employe	should be listed. If two (es are members, if any	or more e , must al:	employees commo so appear. [R.C.:	ute via payroli deducad 3517.10(B)(4)]	on and ex	kceed ine
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 \$		500						
Total Received This Period	the state of the s	(also reco	ord on Form 31-A	-2)				
Total Payments Received the	06((also record on Form 31-B)						
Total Outstanding Balance	Z <u></u> (_ (also record on Form 30-A)						