31-C R.C. 3517.10

## Statement of Loans Received

Page	

Prescribed by Secretary of State 3/05

							,				
Full Name of Committee  Serrott FOR JUDGE  From Whom Received  MARK SERROTT CANDIDA  Address  789 (A) NORTHWEST BI								·			
From Whom Received MARK	SER	ROTT		C	AN	DIDA	Te/J106	Prior Am	Ourt O	-	Amt. Incurred this Period
Address 789 (A	)	Non	TH	WE	<i>5</i> 7	E	Blvd				Outstanding Balance
City State Zip Code CH						This Period	1	Date	s This Period Amount		
Date Loan was	OI	0	) a	01	01	12	1025	M 04	16	172	s 40 av
originally Incurred and Registration Number, if PAC	DI	31	12	01	31	12	1003	M	D	1 1	
Employer/Occupation/Labor Organization*				М	D	Y		М	D	Y	
From Whom Received				<u> </u>	\'	<u>! ! . I</u>		Prior Am	ount	1 !	Amt. Incurred this Period
Address					· · · · · · · · · · · · · · · · · · ·						Outstanding Balance
City	St ate	Zip Code		Γ.	Loan Date	s Received	This Period		Date	Paymen	ts This Period
Date Loan was	М	D	Y	M	Date	Y	Amount	М	D	Y	\$
Registration Number, if PAC		!!!	!	М	D	Y	,	М	D	Y	
Employer/Occupation/Labor Organization*			M	D	Y		М	D	Y		
From Whom Received				•				Prior Am	ount		Amt. Incurred this Period
Address											Outstanding Balance
City	St ate	Zip Code			Loai Date	ıs Receive	This Period	Payments This Period  Date Amount			
Date Loan was	M	D	Y	M	D		\$	M	D	Ý	S
Registration Number, if PAC	<u>'</u>	· · · · · · · · · · · · · · · · · · ·		М	D	Y		M	D	Y	
Employer/Occupation/Labor Organization	1*			M	D	Y	-	M	D	Y	
* Required for contributions from inc the individual's business, if any, rath labor organization of which the emp	ier than ei	mployer sho	uld be his	sted. If t	lwo or m	ore empl	yees contribute via	utor is self- payroll ded	employ uction a	yed, the o and exce	occupation and the name of ed the aggregate of \$100, the
If a loan is forgiven, write "Forgi Income (Form No. 31-A-2). Tran Balance to the Cover page (Form	sfer total	of all payr	nding E nents m	Balance ade in	e" space this per	. Transfe	er total of all loans e Statement of Exp	received enditures	this pe (Form	riod to No. 31	the Statement of Other -B), Transfer Outstanding
<sup>1</sup> Total prior amount \$	0	at at	<del>-</del>								
<sup>2</sup> Total received this period \$	1,0	25º	<b>-</b>	_(To F	orm No	. 31-A-2	)				
<sup>3</sup> Total payments this period \$		25- 40 <sup>05</sup> 285 <sup>0</sup>	<u>~</u>	(	(To For	n No. 31	-B)				
<sup>4</sup> Total Outstanding Balance \$	5 6	785°			(To For	m No. 3	0-A)				