## Statement of Loans Received



				Prescrib	ed by Sec	retary of	State 3/05						
Full Name of Committee		1.	<u>.</u>	·	, _				-			· -,·	
Committee	to	Kee	ED U	ua	9e	<u>ک</u> ر	zuit	-e					
From Whom Received	Λ.	$\bigcirc$	1 1.	_	_	٠, ،	- -		Prior Am	ouni			red this Period
Committee to Keep J From Whom Received Percy and Carole					Squire								00.
					L			3				Outstandin	g Balance 572.24
547 Mohawk	₩ ste	ر Zip Code	<del></del>	_			<del> </del>	<del></del>				+ JUI, C	104,001
Columbus	Oh.	43	206	Loans Received This Period Date Amount					Payments This Period Date Ame				Amount
Data I can mas	М	D	1	М	D	Y	2	_	М	D	Y	s	
Date Loan was originally Incurred			2006			1	0.	00	1			0.	00
Registration Number, if PAC				М	D	Y			М	D	Y		
				1	1								
Employer/Occupation/Labor Organizat	ion*			М	D	Υ			М	, D .	Y		
											ŀ		•
From Whom Received			_		•		-	•	Prior Am	ount		Amt. Incur	ed this Period
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Address							-	•				Outstandin	g Balance
•												•	• •
City ·	St atc	Žip Cod	c	Loans Received This Period					Payments This Period				
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Date Loan was				"									
originally Incurred Registration Number, if PAC	_L,	<u> </u>	<u> </u>	M	D	Y			М	D	Y	<del> </del>	<u> </u>
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Employer/Occupation/Labor Organization*				М	D	Y		-	М	D	Y		
From Whom Received	_		`		<u> </u>		<u> </u>		Prior Am	const		Amt Incur	red this Period
rium whom received								-			·. ·		ica alb i a loc
Address						•						Outstandin	g Balance
City	St ate	Zip Cod	<del></del> ·					•		, ,			
	"-		-	Loans Received This Period Date Amount					Payments This Period Date Amount				
	М	D	Y-	М	D	Y	s,	,	М	D	Y	S	
Date Loan was originally Incurred				1	1				<b>I</b> .	-			-
Registration Number, if PAC	_!	<u> </u>	. !	М	D	Y	1	,	М	Ð	Y	1	
Employer/Occupation/Labor Organization*				М	D	Y			M:	D	Y	1	
									1	1 ,			•
Required for contributions from the individual's business, if any, r	individuals or	over \$100 nployer s	to statewic	de and g	eneral as wo or m	ssembly ore emp	candidate	s. If contribu	tor is self ayroli ded	cmploye	d, the oc	cupation ar	id the name o ate of \$100, t
labor organization of which the e	mployees are	member	rs, if any, m	nust also	appear.	[R.C. 3	517.10(B)	(4)]					
If a loan is forgiven, write "For	rgiven" in t	he "Out	standine F	Balance	" space	. Trans	fer total	of all loans i	eccived	this peri	od to th	e Stateme	nt of Other
Income (Form No. 31-A-2). Tr	ansfer total	of all pa	yments m	ade in	this per	iod to t	he Staten	nent of Expe	nditures	(Form l	No. 31-E	3). Transfe	r Outstàndi
Balance to the Cover page (Fo			7		-			· .					
-			. /									•	
/n /	1571	1 10	$\sqcup I$										

Total prior amount \$ 101, 572.24	
<sup>2</sup> Total received this period \$ 0.00	(To Form No. 31-A-2)
<sup>3</sup> Total payments this period \$ <u>O, OO</u>	(To Form No. 31-B)
<sup>4</sup> Total Outstanding Balance \$ 101, 572. &	(To Form No. 30-A)