Statement of Loans Received

	1	
Page		

			Prescrib	ed by Secre	tary of	State 3/05						
Full Name of Committee Citizens for Kim Magga	rd						•					
From Whom Received Alex Rusty Maggard					Prior Amount \$1,005.00			Amt. Incurred this Period \$0.00				
Address 600 Link Road									Outstanding Balance \$1,005.00			
City Whitehall					Louns Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred Registration Number, if PAC	1 1 1	0 2 0 7	M	D D	Y	s	M	D D	Y	S		
Employer/Occupation/Labor Organi	zation*		M	D	Y	•	М	D	Y			
From Whom Received								nount	<u></u>	Amt, Incurred this Period		
Address	<u> </u>	 -				!		-		Outstanding Balance		
City	St ate OH	Zip Code		Loans Received This Period			Payments T			This Period		
Date Loan was originally Incurred Registration Number, if PAC	M	D Y	M	Date D D	Y	S:	M M	D	Y	\$		
Employer/Occupation/Labor Organization*			M	D	Y	•	M	D,	Y			
From Whom Received			1			:	Prior Ar	nount	1 1	Antt, Incurred this Period		
Address				-		-				Outstanding Balance		
City	St ate 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 D	Y		M	D	Y	s		
Employer/Occupation/Labor Organization*			M	D	Y	<u>:</u> :	M	D	Y			
* Required for contributions fro the individual's business, if an labor organization of which th	y, rather than en	nployer should be li	isted. If t	wo or mo	re emp	loyees contribute via p	utor is sel payroll de	f-employed duction ar	ed, the o	ccupation and the name of ad the aggregate of \$100, the		
If a loan is forgiven, write "Income (Form No. 31-A-2). Balance to the Cover page (Forgiven" in t Transfer total	he "Outstanding of all payments n	Balance	e" space.	Trans	; fer total of all loans	received enditure	l this per s (Form l	iod to t No. 31-	he Statement of Other B). Transfer Outstanding		
¹ Total prior amount \$	\$1,005.00											
² Total received this period	_ (To F	(To Form No. 31-A-2)										

_ (To Form No. 31-B)

(To Form No. 30-A)

\$0.00

\$1,005.00

³ Total payments this period \$ _

⁴ Total Outstanding Balance \$