

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Doug Maggied For School Board																
From Whom Received Doug Maggied					Prior Amount 0.00		Amt. Incurred this Period 2,000.00									
Address 8982 Roberts Rd							Outstanding Balance 2,000.00									
City Galloway	State OH	Zip Code 43119	Loans Received This Period Date		Amount	Payments This Period Date Amount										
Date Loan was originally Incurred	M 0	D 8	Y 0	M 1	D 1	Y 1	\$	2000	M 0	D 8	Y 0	M 1	D 1	Y 1	\$	0.00
Registration Number, if PAC			M 1	D 1	Y 2				M 1	D 1	Y 1					557.06
Employer/Occupation/Labor Organization* SHP Leading Design			M 1	D 1	Y 2				M 1	D 1	Y 1					
From Whom Received					Prior Amount		Amt. Incurred this Period									
Address							Outstanding Balance									
City	State	Zip Code	Loans Received This Period Date		Amount	Payments This Period Date Amount										
Date Loan was originally Incurred	M	D	Y	M	D	Y	\$		M	D	Y	\$				
Registration Number, if PAC			M	D	Y				M	D	Y					
Employer/Occupation/Labor Organization*			M	D	Y				M	D	Y					
From Whom Received					Prior Amount		Amt. Incurred this Period									
Address							Outstanding Balance									
City	State	Zip Code	Loans Received This Period Date		Amount	Payments This Period Date Amount										
Date Loan was originally Incurred	M	D	Y	M	D	Y	\$		M	D	Y	\$				
Registration Number, if PAC			M	D	Y				M	D	Y					
Employer/Occupation/Labor Organization*			M	D	Y				M	D	Y					

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees donate via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. R.C. 3517.10(B)(4)

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 Total Outstanding Balance to the cover page (Form No. 30-A).

- Total prior amount \$ 0.00
- Total received this period \$ 2,000.00 (To Form No. 31-A-2)
- Total Payments this Period \$ 557.06 (also record on Form 31-B)
- Total Outstanding Balance \$ FORGIVEN 1,442.94 (To Form No. 30-A)