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## **Statement of Loans Received**

					Pre	scribed l	ıy S	Secretar	y of St	ste3/05								
Full Name of Committee CITIZENS FOR CARR	IER	,																
From Whom Received	IEN	_										Drive Ar	noun			Amt	Incurred this P	ariod
FRANK CARRIER & HEATHER YARBROUGH-CARRIER											Prior Amount 5,400.00				Cint.	incurred this r	0.00	
Address											$\mathcal{I}_{j-1}$		Outst	anding Balance				
4394 SHIRE CREEK CT.										Outstanding Balance $5,400.0$								
City HILLIARD	Stat		Zip Code 43026		Loans Received This Period  Date Amount					Payments This Period  Date Amount						t		
Date Loan was originally Incurred	м 0	2	о 1 3	ү 1   3	М	D	T	Y	\$		0	М		D 	Y	\$		
Registration Number, if PAC	<u> </u>			2.0	М	D 	Ī	Y I			0.	М		D I	Y	l		
Employer/Occupation/Labor Organization*				М	D	Ì	<u>'</u> Y			0.	М		<del> </del> 	Y	İ			
EPS/NATIONWIDE INSURANCE From Whom Received									Prior Amount Amt. Incurred this Period									
Address										Outstanding Balance								
City	Stat	e	Zip Code	:	Los	ns Recei Date	vec	l This l	Period	Amount	-	Payments This Period  Date Amount					t	
Date Loan was originally Incurred	М		D	Y	М	D		Y	S			М		D 	Y	\$		
Registration Number, if PAC				M	D		Y		<del></del>		М		D I	Y				
Employer/Occupation/Labor Organization*				M	D	$\dagger$	Y			_	М	†	D 	Y	1			
From Whom Received Prior Amount Amt. Incurred this Period									eriod									
Address Outstanding Balance									e									
City	Stat	te	Zip Code	2	Loans Received This Period  Date Amount						Payments This Period  Date Amount							
Date Loan was originally Incurred	М		D	Y	М	D	T	Y	S			, M	T	D	Y	S <sub>.</sub>		
Registration Number, if PAC		1	<u> </u>	<u> </u>	М	D	†	Y				М	T	D I	Y	1	<u>.</u>	
Employer/Occupation/Labor Organization*				М	D	+	Y	<del> </del>			М	+	D D	Y	+	1,,,		
* Required for contributions over \$100 to st if any, rather than employer should be listed	l. If tw	o or	more em	ployees d	•					• •							58,	<u>.</u>
the employees are members, if any, must ap  If a loan is forgiven, write "Forgiven" in the  Transfer total of all payments made in this p	"Outs	tand	ling Balar	ice" space														

1	Total prior amount \$	5,400.00	
2	Total received this period \$	0.00	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	(also record on Form 31-B
4	Total Outstanding Balance \$	5,400.00	(To Form No. 30-A)