

FOR PAPER FILING ONLY  
Statement of Loans Received

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Prescribed by Secretary of State 3405

Full Name of Contributor Brown for Board of Education											
From Whom Received Nita Brown						Prior Amount 9,500.00		Amt. Incurred this Period 0.00			
Address 26600 George Zieger Drive, #405								Outstanding Balance 0.00			
City Beachwood		State OH		Zip Code 44122		Loans Received This Period Date Amount		Payments This Period Date Amount			
		M D Y		M D Y		\$		M D Y		\$	
		0 7 1 2 0 4						1 2 3 1 1 8		FORGIVEN	
Registration Number, if PAC						M D Y		M D Y			
Employer/Occupation/Labor Organization*						M D Y		M D Y			
From Whom Received Marilyn Brown						Prior Amount 16,579.29		Amt. Incurred this Period 0.00			
Address 34 W Poplar Ave								Outstanding Balance 16,579.29			
City Columbus		State OH		Zip Code 43215		Loans Received This Period Date Amount		Payments This Period Date Amount			
		M D Y		M D Y		\$		M D Y		\$	
		0 7 1 2 0 4									
Registration Number, if PAC						M D Y		M D Y			
Employer/Occupation/Labor Organization*						M D Y		M D Y			
From Whom Received Michael C. Brown						Prior Amount 9,000.00		Amt. Incurred this Period 0.00			
Address 23200 Chagrin Blvd								Outstanding Balance 9,000.00			
City Beachwood		State OH		Zip Code 44122		Loans Received This Period Date Amount		Payments This Period Date Amount			
		M D Y		M D Y		\$		M D Y		\$	
		0 7 1 2 0 4									
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).

1 Total prior amount \$ 35,079.29

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 \$ 25,579.29 (To Form No. 30-A)