Statement of Loans Received

				Pre	escribed b	y Secre	tary of Sta	te3/05						
Full Name of Committee	······································	~ ~ ~				***************************************						900 000 000 000 000 000 000 000 000 000		
The Committee for Cl	iris Lo	mg				entologica entologica				Drior Am	ount		I Amt Inci	irred this Period
Sandra Long										Prior Amount 500.00			Aint, met	0.00
Address				······································							9	00.00	Outstandi	ng Balance
1675 Haft Drive													Culotana	Forgive
_{City} Reynoldsburg	State O H	Zip Cod 4306		Loa	Loans Received This Period Date Amount									Period Amount
Date Loan was originally Incurred	м 0 б	D 2 9	Y 0 9	м 0 6	D 2 9	0	\$ 9		500	М	D	Y	\$	
Registration Number, if PAC			<u></u>	М	D	Y				M	D	Y		
Employer/Occupation/Labor Organization*			······································	М	D	Y				М	D	Y		
Evaluations, Inc./Com. Treasurer														
From Whom Received										Prior An	ount		Amt. Incu	irred this Period
Address													Outstandi	ing Balance
City	State	Zip Cod	e	Loans Received This Period Date Amount						Payments This Period Date Amount				
Date Loan was originally Incurred	М	D	Y	М	D	Y	\$			М	D	Y	\$	
Registration Number, if PAC				М	D	Y				М	D	Y		
Employer/Occupation/Labor Organization*				М	D	Y				М	D	Y	The state of the s	
From Whom Received										Prior An	ount		Amt. Inci	arred this Period
Address				- Power Manner Intl									Outstand	ing Balance
City	State	Zip Cod	e	Loans Received This Period Date Amount						Payments This Period Date Amount				
Date Loan was originally Incurred	М	D	Y	М	D	Y	\$			М	D	Y	\$	
Registration Number, if PAC	1		<u> </u>	М	D	Y				М	D	Y	-	
Employer/Occupation/Labor Organization*				М	D	Y				М	D	Y		
* Required for contributions over \$100 to s if any, rather than employer should be listed the employees are members, if any, must ap	l. If two o	more em 2. 3517.10	ployees d (B)(4)	onate via p	oayroll dec	luction	and excee	d the aggreg	ate of \$10	0, the lab	or organiz	zation of v	vhich	2).

1	Total prior amount \$	500.00	•	
2	Total received this period \$	Managery 1994-19, 1884-1994 (1984-1994)	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 \$		0.00	(To Form No. 30-A)