31-C R.C.3517.10

Page		

## **Statement of Loans Received**

Prescribed by Secretary of State 2/01

Brooks for Commissioner   Prom Nimber Received   N. Gregory Kontras   Solo.00   Solo	Full Name of Committee							_												
From Whom Received   South Received This Period   South Received This Pe		ner																		
N. Gregory Kontras  Address  State   Zip Code   Loans Received This Period   Amount   Date   Payment's This Period   Amount   Date   Payment's This Period   Amount   Date   Payment's This Period   Amount   Prox A											Pric	Prior Around					Amt Incurred this Period			
Address   City   State   Zip Code   Loans Received This Period   Amount   Date Amount   Date Code Code Code Code Code Code Code Cod																22110 2110 de los de lo				
State   2p Code   Columbus   Co	Address														- 00		,,,	Outstanding Balance		
City State Zip Code  City Stat	4585 Benderton Court																			•
Columbus  Olific Loan was originally  Incurred I  Olific Loan was originally  Imployer Occupation II.abor Organization*  M D V M D D V M D D D V M D D D V M D D D V M D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D V M D D D V D D																				
Incurred  Registration Number, if PAC  Employer/Occupation/Labor Organization*  M D V M D V  Prior Amount  Annt. Incurred this Period  Date Loans Received This Period  Date Loans Vas Originally  Incurred  M D V M D V  Amount  Date Loans Vas Originally  Incurred this Period  Amount  Date Complex of Companization*  M D V S  Registration Number, if PAC  M D V M D V M D V  Remitted this Period  Amount  Date Employer/Occupation/Labor Organization*  M D V M D V M D V  Remitted this Period  Amount  Date Complex of Companization*  M D V S  Registration Number, if PAC  M D V M D V M D V  Remitted this Period  Amount  Ant. Incurred this Period  Date Complex of Companization*  Amount  Ant. Incurred this Period  Date Complex of Companization*  Amount  Ant. Incurred this Period  Date Complex of Companization*  Amount  Date Complex of Companization*  Amount  Ant. Incurred this Period  Date Complex of Companization*  Amount  Date Complex of Companization*  Date Compl						Date Amount														
Employer/Occupation/Labor Organization*  M D V M M D V Art. Incurred this Period Date  City State Zip Code Loans Received This Period Date Amount  Date Loan was originally:  Employer/Occupation/Labor Organization*  M D V M D V S M D V S  Employer/Occupation/Labor Organization*  M D V M D D V M D V M D D D V M D D D V M D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D V M D D D D	Incurred				- 1	М		D		Y		\$		М		D		Y		\$
From Whom Received  Address  City  State Zip Code  Loans Received This Period Date  Amount  Date  Payments This Period Amount  Date  Prior Amount  Amt. Incurred this Period Date  Date  Date  Date  Payments This Period Date  Date  Date  Date  Date  Payments This Period Date  Date  Date  Date  Payments This Period Da						М		D		Y				М		D		Y		
Address  City  State Zip Code  Loans Received This Period Date Amount  Date Date Date Date Date Date Date Da	Employer/Occupation/Labor Organization*					М		D		Y				М		D		Y		
City State Zip Code Loans Received This Period Date Amount Date Date Amount Date Amount Date Date Date Amount Date Date Date Date Date Date Date Dat	From Whom Received						•							Prio	Prior Amount					Arnt. Incurred this Period
Date Loan was originally M D Y M D Y S M D Y S M D Y S Incurred  Registration Number, if PAC M D Y M D Y M D Y M D Y M D Y M D Y M D Y M D Y M D Y M D Y M D Y M D Y M D D X M	Address Outstanding Balance												Outstanding Balance							
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Interpret   Inte			<u> </u>			_		Date Amount					Amount		D ate					Amount
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Incurred M D Y M D Y	City	State	Zip Co	ide																
	Date Loan was originally Incurred	М	D	1	7	М		D		Y		\$		М		D		Y		\$
Employer/Occupation/Labor Organization* M D Y M D Y	Registration Number, if PAC	'		•		М		D		Y				М		D		Y		
	Employer/Occupation/Labor Organization*					М		D		Y				М		D		Y		

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 \$	500.00		
2	Total received this period \$		0.00	(To Form No. 31-A-2)
3	Total Payments this Period \$		0.00	(also record on Form 31-1
4	Total Outstanding Balance \$	50	00.00	(To Form No. 30-A)