Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee

Friends of Randy Reisling

From Whom Received								Prior Amount	Amt. Incurred this Period
Randy Reisling								4,000.00	

Address									Outstanding Balance
3178 Ranke Ct									4,000.00

City	State	Zip Code	Loans Received This Period				Amount	Payments This Period			Amount
Grove City	O H	43123	Date					Date			
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				Amount	Payments This Period			Amount
			Date					Date			
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				Amount	Payments This Period			Amount
			Date					Date			
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).

1 Total prior amount $ _____ 4,000.00 _____

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 $ _____ 4,000.00 _____ (To Form No. 30-A)