

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Cotter for Community											
From Whom Received Geraldine Cotter						Prior Amount 0.00		Amt. Incurred this Period			
Address 57 Parkview Avenue								Outstanding Balance 100.00			
City Westerville	State o	h	Zip Code 43081	Loans Received This Period		Payments This Period					
				Date	Amount	Date	Amount				
Date Loan was originally Incurred	M	D	Y	M	D	Y	\$	M	D	Y	\$
	0	6	0	1	1	5					
Registration Number, if PAC				M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization* ODIFS				M	D	Y		M	D	Y	
From Whom Received						Prior Amount		Amt. Incurred this Period			
Address								Outstanding Balance			
City	State	h	Zip Code	Loans Received This Period		Payments This Period					
				Date	Amount	Date	Amount				
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	h	Zip Code	Loans Received This Period		Payments This Period					
				Date	Amount	Date	Amount				
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).

- Total prior amount \$ 100.00
- Total received this period \$ 0.00 (To Form No. 31-A-2)
- Total Payments this Period \$ 0.00 (also record on Form 31-B)
- Total Outstanding Balance \$ 100.00 (To Form No. 30-A)