Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee CITIZENS FOR HENNEBERT																	
From Whom Received BRAD HENNEBERT											Prior Amount			Amt. Incurred this Period 160.00			
Address 7888 NEW ALBANY CONDIT RD														Outstanding Balance 160.00			
City WESTERVILLE	State O H	Zip Code 43081		Loans Received This Period Date					Amount		Payments This Period Date				Amount		
Date Loan was originally Incurred	M 9	D 1 7	Y 1 3	M 9	D 1 7	Y 1 3	$			160	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 Date					Amount		Payments This Period 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	Zip Code		Loans Received This Period Date					Amount		Payments This Period 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).

1 Total prior amount $ _____0.00_____

2 Total received this period $ _____160.00_____ (To Form No. 31-A-2)

3 Total Payments this Period $ _____0.00_____ (also record on Form 31-B)

4 Total Outstanding Balance $ _____160.00_____ (To Form No. 30-A)