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Statement of Loans Received

Prescribed by Secretary of State3/05

					J.SCHOOL C	y Secreta	a y 01 00	ile 5705								
Full Name of Committee					_											
Citizens for Jolley																
From Whom Received						Pri	Prior Amount					Amt. Incurred this Period				
	Eric Jolley						500.00					0.00				
Address														Out	tstanding Balanc	
187 Regents Rd	,													4_		300.00
City	State Zip Code Loans Received This Period					1				Pay	ments	nents This Period				
Gahanna	<u> </u>	4323			Date			Amount				ate			Amou	ŭ .
Date Loan was originally	M	D	Y	M	D	Y	s			4	D		Y	s		
Incurred	0 3	1 6	1 5						1	1	31	<u>0 L</u>	<u> 1 :</u>	<u> </u>		200.00
Registration Number, if PAC				М	D	Y !			٨	4	D		Y 			
Employer/Occupation/Labor Organization*)			М	D 1	Y			N	1	D	T	Ϋ́I	1		
From Whom Passined				<u> </u>	<u> </u>	<u>. '</u>	1		Desi	or An	1 I			- A.T.	ut. Incurred this I	Pariod
Rvan P Jollev	From Whom Received Prior Amount							0.00		u. meared ans a	50.00					
Address									-			_ (J.UU		tstanding Balanc	
187 Regents Road														Ou.	ISIAIRIIII BAIAIR	50.00
City		Zip Cod		Loa	ns Recei	ed This	Period						Pay	ments	This Period	
Gahanna	OlH	4323	0	Date Amount						D	ate			Amount		
Date Loan was originally	М	D	Y	М	D	Y	s			4	D		Y	S		
Incurred	018	117	1 5	0 8	1 7	1 5	<u>iL </u>		50					┸		
Registration Number, if PAC				М	D	Y			۸	4	D		Y			
Employer/Occupation/Labor Organization*	•			M!	D	Y	1	<u> </u>	N	4:	D	T	Y	丁		
					l 1	-						- [İ			
From Whom Received Prior Amount								Απ	nt. Incurred this I	^v eriod						
Address Outstanding Balance																
City	State	Zip Cod	e	Loans Received This Period				_	Payments This Period							
		L			Date			Amount				ate			Amou	1 t
Date Loan was originally	М	D	Y	M	D	Y.	s		١	1	D		Y	S		
Incurred	<u> </u>		1			<u> </u>				1		\perp		丄		
Registration Number, if PAC				М	D	Y			N	и! 	D		Y			
Employer/Occupation/Labor Organization				М	D	Y	1	<u> </u>	١	v1!	D		Y	T	·	
				<u>- '</u>	<u> </u>	Т ,				-	1 -			—		
* Description for contributions over \$100 to a	enen ida e		d accemble	v candidat	ne lfaon	mihutar i	s salf.am	nloved occupation	and the	nam	e of the	indiv	vidnaľ	's hasia	ness.	

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)	

1 Total prior amount \$	<u>500.00</u>
2 Total received this period \$	50.00 (To Form No. 31-A-2)
3 Total Payments this Period \$	200.00 (also record on Form 31-B
Total Outstanding Balance \$	350.00 (To Form No. 30-A)

^{*} 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 ormore 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)