



Statement of Loans Received

R.C. 3517.10

Full Name of Committee Frignds of Lori J. Elmore From Whom Received Prior Amount Amt. Incurred this Period								
Friend	ds of	Lori	J. ElM	0/				
From Whom Received						Prior Amount	Amt. In	curred this Period
Lori J. Elmore							10	xo, xx
Street Address						Outstanding Balance		
Street Address 645 Fairway Blud							10	0.0
city Whiteha	State	Zip Code	Loans Received This Period			Payments Received This Period		
		pan (MM/DD/YYYY)	Date of Loan (MM/DD/	YYYY)	Amount	Date of Payment (MM	/DD/YYYY)	Amount
07/07/2017			07/07/2	רוס	100,00			
Registration Number, if			Date of Loan (MM/DD/			Date of Payment (MM	/DD/YYYY)	Amount
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/	YYYY)	Amount	Date of Payment (MM/DD/YYYY) Amoun		Amount
From Whom Received						Prior Amount	Amt. In	curred this Period
Street Address							Outsta	nding Balance
City	State	Zip Code	-		<u> </u>			
ОН			Loans Received This Period			Payments Received This Period		
	Date of Loan (MM/DD/YYYY) Amount		Date of Payment (MM/DD/YYYY) Amount					
Registration Number, if	Date of Loan (MM/DD/YYYY) Amount		Date of Payment (MM/DD/YYYY)		Amount			
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY) Amount		Amount	Date of Payment (MM/DD/YYYY)		Amount
* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also 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 Outstanding Balance to the Cover page (Form No. 30-A).								
Total Prior Amount	\$	-0						
Total Received Thi	(also record on Form 31-A			-2)				
Total Payments Re	(a	_ (also record on Form 31-B)						
Total Outstanding Balance \$ 100.0) (E	(also record on Form 30-A)					