31-	C		
R.C.	351	7.	10

Statement of Loans Received

	4	
Page		

				Prescrib	ed by Sec	netary o	State 3/05				
Full Name of Committee The Committee to Re-Elec	t Judge	McIntosi	1			_					
From Whom Received Stephen L. McIntosh								Prior Am	10unt 100.00		Amt. Incurred this Period
Address 799 Nob Hill											Outstanding Balance \$3,000.00
City Gahanna	St ate OH	Zip Code 43230		п	Loan Pate	s Receiv	ed This Period Amount		P Date	'ayments	This Period Amount
Date Loan was originally Incurred	M	D	Y	M	D	Y	S	M	D	Y	S
Registration Number, if PAC	· <u> </u>		·	М	D	Y		M	D	Y	
Employer/Occupation/Labor Organization	n*			М	D	Y		M	D	Y	
From Whom Received								Prior Am	ount		Amt. Incurred this Period
Address				-			_				Outstanding Balance
City	St ate OH	Zip Code			Loan	s Receiv	ed This Period Amount		P Date	ay ments	This Period Amount
Date Loan was originally Incurred	M	D	Y	M	D	Y	S	M	D	Y	S
Registration Number, if PAC				Mi	D	Y		M	D	Y	
Employer/Occupation/Labor Organization	1*			М	D	Y		М	D	Y	
From Whom Received Prior Amount Amt. Incurred this Pe					Amt. Incurred this Period						
Address											Outstanding Balance
City	St ate OH	Zip Code		C	Loan	s Receiv	ed This Period Amount		P Date	ayments	This Period Amount
Date Loan was	M	D	Y	М	D	Y	s	М	D	Ý	s
Registration Number, if PAC				М	D	Y		М	D	Y	
Employer/Occupation/Labor Organization	1*			М	D	Y		М	D	Y	
* 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											
lf a loan is forgiven, write "Forgi Income (Form No. 31-A-2). Tran											

Balance to the Cover page (Form No. 30-A).

1 Total prior amount \$\$3,000.00	
² Total received this period \$ \$0.00	(To Form No. 31-A-2)
³ Total payments this period \$\$0.00	(To Form No. 31-B)
⁴ Total Outstanding Balance \$ \$3,000.00	0 (To Form No. 30-A)