4

Statement of Loans Received

Prescribed by Secretary of State3/05

Full Name of Committee											***************************************			
Citizens for Kristi Rob	bins													
From Whom Received							Pri	Prior Amount				Amt. Incurred this Period		
Advent Resource Mgmt; Attn: Eric Robbins							200	4,000.00				0.00		
Address											Outstanding Balance			
106 Bellefield Avenue														4,000.00
City Westerville	State OH	Zip Code 4308		Loans Received This Period Date Amour			Amount		Pay Date				oments This Period Amount	
Date Loan was originally Incurred	м 0 9	$\begin{bmatrix} D \\ 0 \end{bmatrix}$ 2	9 0 5	М	D	Y	\$		Į,	f	D		Y	\$
Registration Number, if PAC				М	D	Y			lv	ſ	D		Υ	
Employer/Occupation/Labor Organization*				М	D	Y			h	ſ	D	1	У	
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	М	D	Y	\$		N	Í	D		Y	\$
Registration Number, if PAC	·	-I		M	D	Y			N	í	D		Y	
Employer/Occupation/Labor Organization*				М	D	Y			N	1	D		Y	
From Whom Received										Prior Amount				Amt. Incurred this Period
Address								4-						Outstanding Balance
City	State	Zip Code		Loans Received This Period Date Amount					Payments This Period Date Amount					
Date Loan was originally Incurred	М	D	Y	М	D	Y	\$		N	l	D		Y	\$
Registration Number, if PAC	s			М	D	Y			N	Í	D		Y	
Employer/Occupation/Labor Organization*				М	D	У			ŀ	Í	D	1	Y	
* Required for contributions over \$100 to statewing	le and gen	eral assemb	oly candidat	es. If contri	butor is sei	lf-employ	ed, occi	pation and the nam	e of the individ	lual's	business		amenda oraș	

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 \$	4,000.00	
2	Total received this period \$	0.00	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	_ (also record on Form 31-B)
4	Total Outstanding Balance \$	4,000.00	(To Form No. 30-A)

[&]quot;Regulared for contributions over \$100 to statewise and general assembly candidates, it contribution is seri-employed, occupation and the name of the monitorial sources; 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)