

Statement of Loans Received

Prescribed by Secretary of State 2/01

| | | | | | | | | | | | |
|--|--|--------------------|--|--------------------------|--|----------------------------------|--|---|----------------------|--|--|
| Full Name of Committee CITIZENS FOR CONNOR | | | | | | | | | | | |
| From Whom Received John A. Connor | | | | | | Prior Amount 59,000.00 | | Amt. Incurred this Period | | | |
| Address 436 W 5th Ave | | | | | | | | Outstanding Balance 59,000.00 | | | |
| City Columbus | | State OH | | Zip Code 43201 | | Loans Received This Period | | | Payments This Period | | |
| | | | | | | Date Amount | | | Date Amount | | |
| | | | | | | M D Y \$ | | | M D Y \$ | | |
| Date Loan was originally Incurred 09 10 92 | | | | | | | | | | | |
| Registration Number, if PAC | | | | | | | | | | | |
| Employer/Occupation/Labor Organization | | | | | | | | | | | |

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|--|--|-------|--|----------|--|----------------------------|--|---------------------------|----------------------|--|--|
| From Whom Received | | | | | | Prior Amount | | Amt. Incurred this Period | | | |
| Address | | | | | | | | Outstanding Balance | | | |
| City | | State | | Zip Code | | Loans Received This Period | | | Payments This Period | | |
| | | | | | | Date Amount | | | Date Amount | | |
| | | | | | | M D Y \$ | | | M D Y \$ | | |
| Date Loan was originally Incurred | | | | | | | | | | | |
| Registration Number, if PAC | | | | | | | | | | | |
| Employer/Occupation/Labor Organization | | | | | | | | | | | |

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|--|--|-------|--|----------|--|----------------------------|--|---------------------------|----------------------|--|--|
| From Whom Received | | | | | | Prior Amount | | Amt. Incurred this Period | | | |
| Address | | | | | | | | Outstanding Balance | | | |
| City | | State | | Zip Code | | Loans Received This Period | | | Payments This Period | | |
| | | | | | | Date Amount | | | Date Amount | | |
| | | | | | | M D Y \$ | | | M D Y \$ | | |
| Date Loan was originally Incurred | | | | | | | | | | | |
| Registration Number, if PAC | | | | | | | | | | | |
| Employer/Occupation/Labor Organization | | | | | | | | | | | |

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).

¹ Total prior amount \$ 59,000.00

² Total received this period \$ 00.00 (To Form No. 31-A-2)

³ Total payments this period \$ 00.00 (To Form No. 31-B)

⁴ Total Outstanding Balance \$ 59,000.00 (To Form No. 30-A)