

Statement of Loans Received

Form 31-C

R.C. 3517.10

Full Name of Con	nmittee	A 9 ,	- Pa	0	- 11	- a -			
1 ABB	V 1/1	AIL	t FD	R DUL	CHI	WRE	Ν		
ABBY VAILE FOR DUR CHILDRE							Prior Amount		
ABBY VAILE								# 7	800,00
Street Address /								نسبب سيارها	nding Balance
1433	FAIL	RLA	7.WN						
COLUMB	UMBVS OH 43214			Loans Received This Period			Payments Received This Period		
· · · · · · · · · · · · · · · · · · ·	Date of Origi	nal Loai	(MM/DD/YYYY)	Date of Loan (MM/	DD/YYYYO	Amount	Date of Payment (MM	A/DD/YYYY)	Amount
				8/17/1	7	#500.			
Registration Number, if PAC				Date of Loan (MM/I			Date of Payment (MN	A/DD/YYYY)	Amount
				10/14/1	7	300.			
Employer/Occupation/Labor Organization*				Date of Loan (MM/DD/YYYY) Amount Date of Payme		Date of Payment (MM	A/DD/YYYY)	Amount	
TEACHER									
From Whom Received							Prior Amount	Amt. Ir	curred this Period
							ļ		
Street Address								Outsta	nding Balance
									_
City	s	State	Zip Code	I	 				
ОН				Loans Received This Period			Payments Received This Period		
Date of Original Loan (MM/DD/YYYY)				Date of Loan (MM/DD/YYYY) Amount		Date of Payment (MM/DD/YYYY) Amount			
Designation Number if	DAC	···		Data of Laga (MA)	200000	Amount		4/000000	Amount
Registration Number, if PAC				Date of Loan (MM/DD/YYYY)		Amount	Date of Payment (MM/DD/YYYY) Amount		
Family and Open action II about Open action in the control of the							D. J. Ch. J. Ch. J. Ch. Ch. Ch. Ch. Ch. Ch. Ch. Ch. Ch. Ch		A
Employer/Occupation/Labor Organization*				Date of Loan (MM/DD/YYYY)		Amount	Date of Payment (MM/DD/YYYY) Amount		
* Required for contributiname of the individual's aggregate of \$100, the If a loan is forgiven, writ (Form No. 31-A-2). Trancover page (Form No. 3	business, if a labor organiza te "Forgiven" in nsfer total of al	iny, rathorition of von	er than employer s which the employed utstanding Balance	hould be listed. If twes are members, if a e" space. Transfer to	o or more e ny, must al tal of all loa	employees contri so appear. [R.C. ans received this	bute via payroll deduct 3517.10(B)(4)] period to the Stateme	ction and ex	r Income
Total Prior Amount	t \$								
Total Received This Period \$				(also record on Form 31-A			A-2)		
Total Payments Received this Period \$					(also record on Form 31-B)				
Total Outstanding	\$60.	00	(also record on Form 30-A)						