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Statement of Loans Received

Prescribed by Secretary of State3/05																	
Full Name of Committee Committee to Keep Jud	ിന്റ്	Sanir	' O												-		
From Whom Received	uge	дип		•		_					Dei	or An					The transmitted to the
Percy Squire (Field Resource Management-TV Spot Production)							FIIC	л Ап		\ \	ነດ ሰ	ഹ	Amt. Incurred this Period				
Percy Squire (Field Resource Management-TV Spot Production) 10,000.00							Outstan Jina Dalama										
547 Mohawk Street																	Outstanding Balance 10,000.00
City	State	Zip Co	de	т.	nama D	· · · · ·	red Th	D			_						
Columbus	O H	4320	06	Loans Received This Period Date Amount]	Date		aym	ents This Period Amount	
Date Loan was originally Incurred	1 0	$\begin{vmatrix} D \\ 0 \end{vmatrix}$ 2	2 0 0	M	E		Y		\$		M		D		Y		\$
Registration Number, if PAC		1		М	E		Y				М		D		Y		
Employer/Occupation/Labor Organization*	-			M	D		Y				М		D		Y		
From Whom Received					1	1	<u> </u>				Prio	r Am	ount				Amt. Incurred this Period
Address																	Outstanding Balance
City	State	Zip Co	de	L	oans R	eceiv	ed Thi	is P	eriod	Amount		Paym Date					ents This Period Amount
Date Loan was originally Incurred	М	D	Y	М	D)	Y		\$		М		D		Y		\$
Registration Number, if PAC				М	D		Y				М		D		Y		
Employer/Occupation/Labor Organization*				М	D		Y				М		D		Y		,
From Whom Received						Prio	r Am	ount				Amt. Incurred this Period					
Address			,, <u>,</u>													-	Outstanding Balance
City	State	Zip Cod	le	La	oans R	eceiv	ed Thi	is Po	eriod	Amount		Paym Date					ents This Period Amount
Date Loan was originally incurred	М	D	Y	М	D		Y		\$		М		D		Y		\$
Registration Number, if PAC		<u></u>		М	D		Y	1			M		D	1	Y		
Employer/Occupation/Labor Organization*				М	D		Y	1			М		D	1	Y		
* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business, 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) 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).																	
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1	Total prior amount \$	10,000.00		
2	Total received this period \$	0.0	00	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.0	00	(also record on Form 31-B)
4	Total Outstanding Balance \$	10,000.0	00	(To Form No. 30-A)