2 Total received this period \$

3 Total Payments this Period \$

4 Total Outstanding Balance \$

	1
Page	

## **Statement of Loans Received**

				Pre	scribed by	y Secreta	ary of Sta	te3/05							
Full Name of Committee															
Baker for the Board									Prior An	ount		Amt. Incurred this Period			
From Whom Received							THOI AII		00.00	0.00					
Gary Baker									5,00	00.00	Outstanding Balance				
Address 2142 Staghorn Way													Outstandin		00.00
City		Zip Cod		Loans Received This Period						Payments This Period					
Grove City	O H	4312	3	Date Amount							Date	3	Amount		
Date Loan was originally	M	D	Y	M	D	Y	\$			M	D	Y	\$		
Incurred	0 6	2 9	0 7						0						
Registration Number, if PAC	····			М	D	Y				М	D	Y			
Employer/Occupation/Labor Organization*				М	D	Y				М	D	Y		<del></del>	
p va p					l	l	<u> </u>			Prior An	nount		Amt Inqui	rad this Dario	d
From Whom Received										FIIOI AII	noune	0.00	Amt. Incurred this Period		
Diane Wendel Baker												0.00	2,000.00		
Address 2142 Staghorn Way												Outstandir	ng Balance <b>2,</b> 00	00.00	
City	State Zip Code Loans Received This Period									Payments This Period					
Grove City	OH	4312	3		Date			Amount		Date Amoun					
Date Loan was originally	M	D	Y	M	D	Y	\$			M	D	Y	\$		
Incurred	1 0	3 0	0 7	1 0	3 0	0   7	7		2000						
Registration Number, if PAC			•	М	D	Y				М	D	Y			
Employer/Occupation/Labor Organization*	k			М	D	Y				М	D	Y		· · .	
From Whom Received									Prior Ar	nount		Amt. Incurred this Period			
Address												Outstandi	ng Balance		
Cir.	State	Zip Cod	la	<del></del>		L m	<u> </u>								
City	State	Zip Coo		Loans Received This Period  Date Amount							Dat	•	nents This Period Amount		
Date Loan was originally	M	D	Y	М	D	Y	\$			М	D	Y	\$		
Incurred															
Registration Number, if PAC				М	D	Y				М	D	Y			
Employer/Occupation/Labor Organization	*			М	D	Y				М	D	Y			
* Required for contributions over \$100 to s															
if any, rather than employer should be liste the employees are members, if any, must a				ionate via	payron d	eduction	and exce	ed the aggreg	gate of 5	roo, the is	ador organ	itzation of	Which		
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 \$		5,0	00.00	_											

2,000.00 (To Form No. 31-A-2)

7,000.00 (To Form No. 30-A)

0.00 (also record on Form 31-B)