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R	C.	351	7	10

Page	2

Statement of Loans Received

				Pre	escribed b	y Secreta	ry of Sta	ste3/05				
Full Name of Committee	_											
Thomas Haves for Juc	ige Co	ommi	ttee									
From Whom Received								Prior Amount			Amt. Incurred this Period	
Ron Cameron: Safegu	ard B	usines	ss Svs	tems							0.00	502.87
Address												Outstanding Balance
1721 W. 3rd Ave.												502.87
City		Zip Code		Lon	ns Receiv	ed This	Period		Payments This Period			
Columbus	<u> </u>	4321	2	1	Date			Amount		D	late	Amount
Date Loan was originally	M	D	Y	М	D	Y	s		М	D	Y	s
Incurred	0 5	3 0	1 4	0 5	310	1 4		502.87			1 1	
Registration Number, if PAC				M	D.	Ÿ			М	D	Y	
Employer/Occupation/Labor Organization*				M!	Ð	Y	1		M	Ď	Y	
					! !]	ĺ					
From Whom Received									Prior .	Amount		Amt. Incurred this Period
												1
Add re ss												Outstanding Balance
City	State	Zip Code	:	Loans Received This Period Date Amount				Payments This Period Date Amount				
Date Loan was originally	м	D	Y	M!	D	Ϋ́	Is		мi	T D		Tc .
Incurred		1	i i i		1	Ι'n	ľ			l i	1 1	ŗ
Registration Number, if PAC		<u> </u>	<u> </u>	M	Ð	Y	 		М	D	 '	
					l -	lī				1 1	1 1	1
Employer/Occupation/Labor Organization*				М	Đ	Y			M		 '	
					Ιĩ	Ι'n				1 1		
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	M	Ð	Y	Mi	D	Y	k		М	T D	T Y	k
Incurred		l ~	1 1		ا آ	1	ſ		·"	1 1	1 1	ľ
Registration Number, if PAC			L <u>-</u>	M	D	Y	 	-	M	D	'	
					Ιū	l -	1		"	[1 1	
Employer/Occupation/Labor Organization* M D Y M D Y												
The state of the s					Ιű	l i	1				1 1	
							1		<u> </u>		. 1 '	
* Required for contributions over \$100 to st	atewide a	nd g ener al	assembly	candidate	s. If cont	ributor is	self-emp	loyed, occupation and	the na	zze of the	individual's	business,

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 \$	0.00	
2	Total received this period \$	502.87	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	(also record on Form 31-B)
4	Total Outstanding Balance \$	502.87	(To Form No. 30-A)

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)