

## **Statement of Loans Received**

Form 31-C

	1			R.C. 3517.10
Full Name of Committee  SERROTT FOR	JUDGE			
From Whom Received  MARK SERROTT			Prior Amount	Amt. Incurred this Period
Street Address 1893 W. FIRS T	<u> </u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Outstanding Balance
City COLUMBUS OH 43212	Loans Received Ti	nis Period	Payments This Period	
Date Loan was Originally Incurred (MM/DD/YYYY)  0 1/01/2019	Date of Loan (MM/DD/YYYY) 0//0//2019 76 12/30/ 2019	Amount 132 00	Date of Payment (MM/DD	D/YYYY) Amount
Registration Number, if PAC (SEE ATT ACHED MONTHLY BANK STATE MENTS OF	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DI	D/YYYY) Amount
Employer/Occupation/Labor Organization*	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD	D/YYYY) Amount
From Whom Received  MARK SERROTT			Prior Amount	Amt. Incurred this Period
Street Address 1893 W. FIRST AVE			1   1/2   1   1   1   1   1   1   1   1   1	Outstanding Balance
City State Zip Code 43212	Loans Received TI	nis Period	Payments This Period	
Date Loan was Originally Incurred (MM/DD/YYYY)	Date of Loan (MM/DD/YYYY)  01/31/2019	Amount 750 2	Date of Payment (MM/DI	Amount 750 00
Registration Number, if PAC	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DI	D/YYYY) Amount
Employer/Occupation/Labor Organization*	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DI	O/YYYY) Amount
* Required for contributions from individuals over \$100 to stated name of the individual's business, if any, rather than employer saggregate of \$100, the labor organization of which the employer	hould be listed. If two or more e es are members, if any, must al	employees contribuso appear. [R.C. 3	ite via payroll deduction 517.10(B)(4)]	n and exceed the
If a loan is forgiven, write "Forgiven" in the "Outstanding Balanc	e" space. I ransfer total of all loa	ans received this p	eriod to the Statement	of Other Income

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).

Total Prior Amount \$ 539 ••	
Total Received This Period \$ 882 02	(also record on Form 31-A-2)
Total Payments Received this Period \$ 75000	(also record on Form 31-B)
Total Outstanding Balance \$ 671 00	(also record on Form 30-A)