Statement of Loans Received

| | 4 | |
|------|---|------|
| Page | _ | |

Prescribed by Secretary of State 3/05

| Full Name of Committee | | | | | | | | |
|---|--|-------------|--|---------------|---|-----------------------------------|---------------------------------------|---------------------------|
| Sheets for Trustee | | | | | | | | |
| From Whom Received | | | | | | Prior Amount | | Amt. Incurred this Period |
| Edward Sheets | | | | | | \$300.00 | ı | \$0.00 |
| Address | | | | | | T | 2 Norm_84 | Outstanding Balance |
| 6101 Lambert Road | | | | | | gr. an | | \$49.45 |
| | St ate Zip Code | | | | | | 1 N/2 * | |
| City Orient | OH Zip Code 43146 | | Loans Received This Period Date Amount | | | Payments This Period Date Amount | | |
| Date Loan was | $\begin{bmatrix} M & D & D \\ 0 & 9 & 1 & 2 \end{bmatrix}$ | Y N | M. D | Y. \$ | | 1 2 0 | 9 1 1 | \$ \$250.55 |
| Originally Incurred Registration Number, if PAC | | | M D | Y | | M D | Yi | |
| Nogionation Nombout, 11 1110 | | | ; | | | | | ł |
| Employer/Occupation/Labor Organiz | ation* | | M D | Y | | M D | Yı | |
| | | | | | | | | |
| From Whom Received | | | <u> </u> | | | Prior Amount | | Amt. Incurred this Period |
| | | | | | | | C*** | |
| Address | | | | | | | 191 | Outstanding Balance |
| City St ate Zip Code | | | Loans Received This Period | | | Payments This Period | | |
| | OH | | Date | ns Received 1 | Amount | Date | rayments | Amount |
| Date Loan was | M D | Y | M _i D _i | Y \$ | | M D | | 5 |
| originally Incurred | | —— <u> </u> | <u> </u> | Y | | M D | 4 | _ |
| Registration Number, if PAC | | | . | ' | | | | |
| Employer/Occupation/Labor Organization* | | | M D | Y | | M D | Y | |
| From Whom Received | | | <u> </u> | | | Prior Amount | | Amt. Incurred this Period |
| Address | | | | | · • • • • • • • • • • • • • • • • • • • | 4 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Outstanding Balance |
| City | St are Zip Code | | Loans Received This Period Date Amount | | Payments This Period Date Amount | | | |
| | M D | Y | M D | Y \$ | Amoun | M D | | \$ |
| Date Loan was originally Incurred | | | | | | | s | |
| Registration Number, if PAC | | | M D | Y | | M D | Y | Į. |
| | | 1 | · | 1 . 1 | | 1 . | | |
| li . | | | | | | | | |
| Employer/Occupation/Labor Organiz | ation* | 1 | M D | Y | | M D | Y | |

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 \$\$300.00 | | | | | |
|-------------------------------|-----------------------|--|--|--|--|
| \$0.00 | (To Form No. 31-A-2) | | | | |
| \$250.55 | (To Form No. 31-B) | | | | |
| \$49.45 | forgi Word MNo. 30-A) | | | | |
| | \$0.00 \$250.55 | | | | |

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]