

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Doucher for Judge												
From Whom Received Kimberley A. Doucher								Prior Amount 0.00		Amt Incurred this Period 480.39		
Address 6065 Frantz Rd, Suite 104										Outstanding Balance 480.39		
City Dublin		State O H	Zip Code 43017	Loans Received This Period Date Amount				Payments This Period Date Amount				
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
		1	0	0	1	0	9	229.38				
Registration Number, if PAC				M	D	Y	\$	M	D	Y	\$	
				1	2	0	3	0	9	19.36		
Employer/Occupation/Labor Organization*				M	D	Y	\$	M	D	Y	\$	
Attorney, Doucher & Doucher				1	2	0	4	0	9	64.42		
From Whom Received Kimberley A. Doucher								Prior Amount		Amt Incurred this Period		
Address 6065 Frantz Rd, Suite 104										Outstanding Balance		
City Dublin		State O H	Zip Code 43017	Loans Received This Period Date Amount				Payments This Period Date Amount				
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
		1	1	2	0	0	9	87.23				
Registration Number, if PAC				M	D	Y	\$	M	D	Y	\$	
						0	9	80.00				
Employer/Occupation/Labor Organization*				M	D	Y	\$	M	D	Y	\$	
Attorney, Doucher & Doucher												
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 Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC				M	D	Y	\$	M	D	Y	\$	
Employer/Occupation/Labor Organization*				M	D	Y	\$	M	D	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 or more 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).

- Total prior amount \$ 0.00
- Total received this period \$ 480.39 (To Form No 31-A-2)
- Total Payments this Period \$ 0.00 (also record on Form 31-B)
- Total Outstanding Balance \$ 480.39 (To Form No 30-A)