Statement of Loans Received

Prescribed by Secretary of State3/05									
Full Name of Committee									
BEATTY FOR JUDGE			sactornitarios.	20. No. 100192011496		Prior Am	lonnit		Amt. Incurred this Period
From Whom Received					Prior Amount 500.00		າດ ດດ	0.00	
Laurel A. Beatty			***************************************			_	, , , , , , , , , , , , , , , , , , ,	0.00	Outstanding Balance
Address 268 E. Gates Street									500.00
City State Zip Code O H 43206	Loa	Loans Received This Period Date Amount			Amount	Payments This Period Date Amount			
Columbus O H 43206 Date Loan was originally M D Y	М	Date	Y	Is	Athount	М	D	Y	\$
Incurred 1 0 0 6 0 9	101			Ð					
Registration Number, if PAC	М	D	Y			М	D	Y	
Employer/Occupation/Labor Organization*	М	D	Y		da mai de consequencia de cons	М	D	Y	
From Whom Received						Prior An	nount		Amt. Incurred this Period
Laurel A. Beatty							10	00.00	0.00
Address	***************************************	**************************************							Outstanding Balance
268 E. Gates Street	MANAGEMENT OF THE STATE OF THE								100.00
City State Zip Code	Loa	ıns Receiv	ed This	Period		Payments This Period			
Columbus O H 43206		Date			Amount		Dat		Amount
Date Loan was originally M D Y Incurred 1 0 2 2 0 9	M	D	Y	\$		M	D	Y	35
Registration Number, if PAC	М	D	Y			М	D	Y	
Employer/Occupation/Labor Organization*	М	D	Y			М	D	Y	
			<u> </u>			Prior Ar	l l		Amt. Incurred this Period
From Whom Received						FHOI AI		00.00	0.00
Laurel A. Beatty							Ŧ	00.00	Outstanding Balance
Address 268 E. Gates Street									100.00
City State Zip Code	Loans Received This Period				Payments This Period				
Columbus OH43206		Date			Amount		Dat		Amount
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	М	D	Y	\$		М	D	Y	\$
Registration Number, if PAC	М	D	Y			М	D	Y	
To the Maker Openington*	M	D	Y			М	D	$\frac{1}{Y}$	
Employer/Occupation/Labor Organization*	IVA		1						
	S. Contraction of the Contractio	<u> </u>	olerania de la constanta de la	nonthemonomen					Name of the second seco
* 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 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)									

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-/	1-2
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 \$	700.00	
2	Total received this period \$	0.00	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	(also record on Form 31-B
4	Total Outstanding Balance \$	700.00	(To Form No. 30-A)