31-C R.C. 3517.10

Statement of Loans Received

Page	 -

Prescribed by Secretary of State 3/0

			FICSCII	bed by Sec	Clary Or	State 3/03				
Full Name of Committee Citizens To Retain Hood										
From Whom Received James E. Hood					Prior An \$8,	nount 000.00		Antt. Incurred this Period \$0.00		
Address 8388 Lucerne Drive										Outstanding Balance \$0.00
City Reynoldsburg	St ate OH	Zip Code 43068	Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred	1 2	2 0 1 0	M	D	Y	\$	0 ^M 2		1 1	\$ \$8,000.00
Registration Number, if PAC			M	D	Y		М	D	Y	:
Employer/Occupation/Labor Organization*			M	D	Y		M	D	Y	
From Whom Received						Prior At	nount		Amt, Incurred this Period	
Address				•						Outstanding Balance
City	St ate OH	Zip Code	Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred	М	D Y	M	D	Y	S	М	D. same	Y	\$
Registration Number, if PAC			М	D	Y		M	D	Y	
Employer/Occupation/Labor Organization	n*		M	D	Y		М	D	Y	
From Whom Received							Prior Ar	nount		Amt, Incurred this Period
Address								,	Outstanding Balance	
City	St ate OH	Zip Code	Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred	М	D Y	M	D	Y	S	M	D	Y	\$
Registration Number, if PAC			М	D	Y		М	D	Y	
Employer/Occupation/Labor Organization*			М	D	Y		M	D	Y	
* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of										

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 \$\$8,0	000.00	
² Total received this period \$	\$0.00	(To Form No. 31-A-2)
³ Total payments this period \$ _	\$8,000.00	(To Form No. 31-B)
⁴ Total Outstanding Balance \$ _	\$0.00	(To Form No. 30-A)
· Total Outstanding Balance \$ _		(10 Form No. 30

^{*} 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)]