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Statement of Loans Received

Prescribed by Secretary of State 3/05

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Full Name of Committee							-								
The Committee To Re-	Elect	Judge	e M <u>cI</u> :	ntosł	ì										
From Whom Received							Prior	Prior Amount				Ams. Incurred this Period			
Stephen L. McIntosh						3,000.00					0.00				
Address									 -						Outstanding Balance
799 Nob Hill															3,000.00
City	State	Zip Code		Loans Received This Period					Payments This Period						
Gahanna	HC	4323()	Date Amount			Date A				Amount				
Date Loan was originally Incurred	M 1 0	D 1 2	9 0 4	М	D		Y	S		М		D	Y		S
Registration Number, if PAC				М	D		Y		-	М		D	Y		
Employer/Occupation/Labor Organization*				M	D		Ϋ́			М		D	Y		
From Whom Received						-			-	Prior Amount Amt, Incurred this Period					Amt, Incurred this Period
Address	-						_								Ourstanding Balance
City	State	Zip Code		Loans Received This Period Date Amount				Payments This Period Date Amount							
Date Loan was originally	М	D	Y	М	D		Y	S		М	1	D	Y		S
Registration Number, if PAC	· · · · ·			М	D		Y	Ī		М	İ	D	Y		
Employer/Occupation/Labor Organization*	_			М	Đ		Y			М		D	Y		
From Whom Received	_					, ,		•	·	Prio	г Атқ	nrii			Annt, Incurred this Period
Address															Outstanding Bahince
City	State	Zip Code		Loans Received This Period Date Amount				Payments This Period Date Amount							
Date Loan was originally Incurred	М	D	Y	М	D		Y	S		М		D	\	<u> </u>	S
Registration Number, if PAC				M	D		Y			М		D			
Employer/Occupation/Labor Organization®		-		М	D		Y			М		D	,		
* Required for contributions over \$100 to state with	de and gen	eral assemi	bly candida	tes. If con	tributer i	is self-er	molove	d occ	upation and the name of	the individ	nal's b	usiness,		-	<u> </u>

If a loan is for given, write "For given" 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).

1	Total prior amount \$	3,000.00	
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 S	3,000.00	_ (To Farm No. 30-A)

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)