



# Statement of Loans Received

Form 31-C

R.C. 3517.10

<b>Full Name of Committee</b> Friends For Sorenson					
From Whom Received Joseph Sorenson				Prior Amount 0	Amt. Incurred this Period 200
Street Address 2270 Ayers Drive				Outstanding Balance 200	
City Reynoldsburg	State OH	Zip Code 43068	<b>Loans Received This Period</b>		<b>Payments This Period</b>
Date Loan was Originally Incurred (MM/DD/YYYY) 06/19/2019		Date of Loan (MM/DD/YYYY) 06/19/2019	Amount 200	Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
Employer/Occupation/Labor Organization* Reynoldsburg City Schools		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
From Whom Received Friends For Bhuwan				Prior Amount 0	Amt. Incurred this Period 500
Street Address 8386 Ashlynd Place				Outstanding Balance	
City Reynoldsburg	State OH	Zip Code 43068	<b>Loans Received This Period</b>		<b>Payments This Period</b>
Date Loan was Originally Incurred (MM/DD/YYYY) 08/26/2019		Date of Loan (MM/DD/YYYY) 08/26/2019	Amount 500	Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
Employer/Occupation/Labor Organization* Political office Committee		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount

\* 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)]

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 \$ 0

Total Received This Period \$ ~~200~~ 700 (also record on Form 31-A-2)

Total Payments Received this Period \$ 0 (also record on Form 31-B)

Total Outstanding Balance \$ ~~200~~ 700 (also record on Form 30-A)