31-C R.C. 3517.10

## Statement of Loans Received

	6	
Page	U	

Prescribed by Secretary of State 3/03

Full Name of Committee											·	<del></del>		
Committee to Retai	in Ind	go Rooco												
From Whom Received	err Jud	ge keece					<del></del>	Prior An	ount.		Aunt Incu	Amt. Incurred this Period		
Guy L. Reece, II								1	00.0	Λ	Aut. meu	0.00		
Address								4,0	00.0		Outstandi			
7191 Keystone Rand	ah Cou	**									ľ	Outstanding Balance		
City	St ate	Zip Code									4	,000.00		
Blacklick	OH	43004	Loans Received This Period				Payments This Period							
DIACKTICK	M.	D Y	M:	Date D	Ϋ́I	Is .	Amount	M	Date	Y!	Is	Amount		
Date Loan was originally Incurred	10	2 5 0 4												
Registration Number, if PAC			M	D.	Y			M	D	Y				
Employer/Occupation/Labor Organization	n*		M	D	Y			М	D	Y				
From Whom Received						<u>i                                      </u>		Prior An			Amt Tra	rred this Period		
								1,101,701	.vuit		Zant. MCt	aron mis remot		
Address											Outstandi	ng Balance		
							)-1 }-12				O Ligitation	Daranoc		
City	St ate	Zip Code	Loans Received This Period				Payments This Period							
	M.	D. 1 Y	M <sub>t</sub>	Di Di	Yi	s	Amount	M	Date Di	l vi		Amount		
Date Loan was originally Incurred	is.		IVP		1	ľ					ľ			
Registration Number, if PAC		<u> </u>	М	D	Y			М	D	Y				
Employer/Occupation/Labor Organization	n*		M	D	Y	<del>                                     </del>		М	D	Y				
From Whom Received			<u> </u>	1	l	<u> </u>		Prior Ar	nount	_	Amt, Inci	arred this Period		
Address								•, •		, 20 ° .	Outstandi	ng Balance		
City	St atc	Zip Code		Loans	Recei	ed This P	Period	f		Pavmen	ts This Perio	d		
				Date			Amount		Date	,		Amount		
Date Loan was originally Incurred	M	D Y	M	D	Y	S		М	D	Y	S			
Registration Number, if PAC	1	! ! !	M	D)	Y	1		M	D,	Y				
•											1			
Employer/Occupation/Labor Organization*		М	Di	Y			М	D	Y	<del></del>	-			
			■ i	1 1	1 1	1		•	1	1 1	1			

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 \$ 4,000.00	
<sup>2</sup> Total received this period \$0.00	(To Form No. 31-A-2)
Total payments this period \$ 0.00	(To Form No. 31-B)
<sup>4</sup> Total Outstanding Balance \$ 4,000.00	(To Form No. 30-A)