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## **Statement of Loans Received**

Prescribed by Secretary of State 3/05

					escribed b	,	.,						
Full Name of Committee													
Friends of Cornell Ro	bertso	on											
From Whom Received								Prior Amount				Amt. Incurred this Period	
Cornell Robertson									2,122.23				41.00
Address									` .				Outstanding Balance
5434 Schatz Lane													2,163.23
City	State	Zip Co		Loa	ns Receiv	ed This	Period		Payments This Period				
Hilliard		I 4302		<u> </u>	Date			Amount	Date				Amount
Date Loan was originally	M	D	Y	M	D	Y	\$		M	Γ.		Y	\$
Incurred	0   4	1   2	1 1	1 2	1   3	1   1		41.00					
Registration Number, if PAC				M	D 	Y			М	E		У	
Employer/Occupation/Labor Organization*				M	D	Y			М		)	Y	
From Whom Received				<u>'</u>	'	'	•		Prior 4	Amount			Amt. Incurred this Period
Address		•					•				•		Outstanding Balance
City	State	Zip Co	de	Log	Loans Received This Period Date Amount					Payments This Period Date Amount			
Date Loan was originally	M	D	Y	MI	D	Y	S	THIOTH	ML	Ιı		Y	S
Incurred	"		11		1 "1	l i	ľ				1		
Registration Number, if PAC	<u>, , </u>			М	D	Y	+		М	<del> </del>	)	Y	
					lί	lί					1	Li	
Employer/Occupation/Labor Organization*	:			М	D	Y	†		M	1	)	Y	
,													
From Whom Received				·					Prior .	Amount	•	•	Amt, Incurred this Period
Address												- 19 es	Outstanding Balance
City	State	Zip Co	de	Loans Received This Period  Date Amount				Payments This Period Date Amount					
Date Loan was originally	M	D	ΤΥ	M	T D	Гу	S		M	1		Y	\$
Incurred							1				1		
Registration Number, if PAC	1 . !	1 !	<u> </u>	М	D	Y	1	· -	М	-	<del>)</del>	Y	
					Li					-	1		
Employer/Occupation/Labor Organization*		<del></del>		MI	D	Y	+		M	+	<del>,</del>	Y	
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· ·				4	<del>' '</del>	<del></del>			•				<del></del>

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 Total Outstanding Balance to the cover page (Form No. 30-A).

1	Total prior amount \$	2,122.23	
2	Total received this period \$	41.00	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	(also record on Form 31-B)
4	Totał Outstanding Balance \$	2,163.23	(To Form No. 30-A)

<sup>\*</sup> 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)