Page	4

Statement of Loans Received

				P	rescribe	d by	y Secreta	ary of State	3/05									
Full Name of Committee		, ,																
BEATTY FOR JUDG	E											_						
From Whom Received											Prior	Am	ount		Amt Ir	curred this	Period	
Laurel Beatty															Outotos	ding Balan		
Address 268 E Gates St.															Ouisiai	iuiiig Daiaii	500.00	
City	State	State Zip Code			Loans Received This Period									Pay	ments Th	ents This Period		
Columbus	ОН	43206			Dat	te			Amount				Dat			Amou	int	
Date Leanweec of pinelly Internet	м 1 0	D 0 6	Y 0 9	М	D		Y	\$		500	М		D	Y	\$			
Registration Number, if PAC	1 0	10101	<u>U J</u>	М	D		Y.			500	М		D	Y				
Employer/Occupation/Labor Organization	on*	.		М	D		Y	-			М		D	Y	-			
																	D1	
From Whom Received Laurel Beatty											Prior	Am	ount		Amt In	curred this	Period	
Address	**************************************														Outstan	dıng Balan	ce	
268 E. Gates St.																	100.00	
City Columbus	State O H	Zip Code 43206		Lo	oans Red Dat		ed This	Period	Amount				Dat	•	ments Th	nents This Period Amount		
Date lions were originally	M	D	Y	М	Dal		Y	\$	Amount		М		D	Y	s	rino		
Registration Number, if PAC	1 0	2 2	0 9	М	D	_	Y			100	M		D	Y				
Registration Number, it is not							Ì				•							
Employer/Occupation/Labor Organization	on*			М	D		Y				М		D —	Y				
From Whom Received			·								Pnor	Am	ount		Amt In	curred this	Period	
Laurel Beatty																		
Address 268 E Gates St.															Outstan	dıng Balan	100.00	
City	State	Zıp Code			ana Da	1	ad This	Dowlad .	·					Derv	ments The	a Damed	100.00	
Columbus		43206		Loans Received This Period Date Amount									Dat	•	nents in	ents This Period Amount		
Date loan was offinally	М	D	Y	М	D		Y	S			М		D	Y	s			
Registration Number, if PAC	1 1	3 0	0 9	M	D		Y	-		100	М	\dashv	D	Y	_			
													ا					
Employer/Occupation/Labor Organization	on*			М	D		Y				M		D	Y				
* Required for contributions over \$100 t	o statewide	and general	assembl	y candid	lates If	cont	tributor 1	s self-emp	loyed, occu	pation ar	d the	nam	e of the	ındıvıdu	al's busine	SS,		
if any, rather than employer should be la		_		-				-	-	-								
the employees are members, if any, mus	t appear R (3517 10(B)(4)															
If a loop to formulart. NF	the HOuter	ndena D-1		. T		_*	.11 1a		hun mamad 4-	the Cur			When Ir-		N- 21	A 2\		
If a loan is forgiven, write "Forgiven" in Transfer total of all payments made in the		_	•						•					•		•		
Transfer total of all payments made in u	ns periou w	are stateme	III OI EA	penanun	es (rom	11 140	5 31- D)	I tansici	I Otal Outsta	nicing De	iiaiicc		iic covei	page (r c	MIII 140 30	-11,		
1 Total prior amount \$		I	0.00	,														
2 Total received this period \$	<u>.</u>		70	00.00	_ (To F	Form	n No 31	-A-2)										
3 Total Payments this Period \$				0.00	(also	rec	ord on F	orm 31-B)	ı									
4 Total Outstanding Balance \$			70	00.00	(To F	orn	n No 30	-A)										