

## **Statement of Loans Received**

Prescribed by Secretary of State3/05

						, = : 5: 5:	, -		·					
Full Name of Committee	1 11	ъ.												
Franklin County Repu	ıblica	n Part	v - Ca	mpai	gn									
From Whom Received						Prior Ar		00.00	Amt. Incurre	d this Period				
Citizens for Bill Schuck							1,0	00.00						
Address							4		Outstanding					
865 Macon Alley				_						-	* * ;	7 2	L	1,000.00
City		State Zip Code Loans Received This Period						Payments This Period						
Columbus	• • • • • • • • • • • • • • • • • • • •	[4320]		Date Amount			Amount	Date				Amount		
Date Eoan was originally:	М	D <sub>.</sub>	Y	М	D,	Y	S			M	D	Y	\$	
Incurred	0 2	1 0	0 0				┸					<u> </u>		<u> </u>
Registration Number, if PAC				М	D	Y				М	D	Y	1	
Caralance/Occupation/Labor Occupiention*				M	D	Y	┰			м	D .	Y		<del>.</del>
Employer/Occupation/Labor Organization*				ivi	"	'				"	ľ	l 'n		
From Whom Received			****	<u>'</u>	,	<u> </u>				Prior A	mount	1 :	Amt. Incurre	d this Period
Bradley K. Sinnott										,			1	4,500.00
Address Outstanding Balance														
52 E. Gay St.														4,500.00
City	State	Zip Cod	e	Loa	ns Receiv	ved This	Per	iod				Paym	ents This Per	<del></del>
Columbus	OF	H 43215 Date Amount					Amount	Date				Amount		
Date Loan was originally	М	D	Y	M	D	Y	\$			M	D	Y	\$	
Incurred .	0     4	219	1   5	0 4	2 9	$1 \mid 5$	5		4500.00					
Registration Number, if PAC	1			М	D	Y				М	D	Y		
					1 1									
Employer/Occupation/Labor Organization*				М	D	Y	T			М	D	Y		
Attorney														
From Whom Received			•							Prior A	mount		Amt. Incurre	ed this Period
Preisse Consulting, Ll	LC (I	oug F	reisse	:)										4,500.00
Address										186 8 8		, ¥1,	Outstanding	
41 S. High Street; Suit	e 371	0								1 5				4,500.00
City		Zip Cod	e	Loa	ns Recei	ved This	s Per	riod				Payn	ents This Pe	riod
Columbus	OIL	I 4321	5	į .	Date				Amount		Da	te		Amount
Date Loan was originally	М	D	Y	М	D	Y	\$			М	D	Y	s	
Incurred	$ 0 _{4}$	. 219	1   5	0 4	2 9	1115	5		4500.00					
Registration Number, if PAC		1 - 1 -	11	M	D	Y	T			М	D	Y		
1												l .		
Employer/Occupation/Labor Organization*			М	D	Y	7			М	D	Y			
Consulting						1						l		
						<del></del>			<del></del>	<del> '</del>		-		
* Required for contributions over \$100 to s	tatewide	and genera	al assembl	y candidat	es. If con	tributor i	is sel	lf-emplo	yed, occupation and	i the nan	ne of the in	ndividual's	business.	
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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. 3	1-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. 3	30-A).

1	Total prior amount \$	1,000.00	
2	Total received this period \$	9,000.00	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	(also record on Form 31-
4	Total Outstanding Balance \$	10,000.00	(To Form 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)