



Statement of Loans Received

Form 31-C

R.C. 3517.10

Full Name of Committee UA For Angela Lanctot					
From Whom Received Roy Lanctot				Prior Amount	Amt. Incurred this Period 2000.00
Street Address 141 E. 199th St.					Outstanding Balance 2000.00
City Euclid	State OH <input type="checkbox"/>	Zip Code 44119	Loans Received This Period		Payments This Period
Date Loan was Originally Incurred (MM/DD/YYYY) 10-29-19			Date of Loan (MM/DD/YYYY)	Amount	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*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY) Amount
From Whom Received Larry Lilly				Prior Amount	Amt. Incurred this Period 2000.00
Street Address 2641 Alliston Ct.					Outstanding Balance 2000.00
City Upper Arlington	State OH <input type="checkbox"/>	Zip Code 43220	Loans Received This Period		Payments This Period
Date Loan was Originally Incurred (MM/DD/YYYY) 11-20-19			Date of Loan (MM/DD/YYYY)	Amount	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*			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 \$ 4000.00 (also record on Form 31-A-2)

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

Total Outstanding Balance \$ 4000.00 (also record on Form 30-A)