FOR PAPER FILING ONLY

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Statement of Loans Received

Prescribed by Secretary of State3/05

Full Name of Committee													
Brown for Board of Education													
From Wass Received						Prior Amount					Asst. Incurred this Period		
Evan Brown						1	10,748.00) [0.00		
Address											Outstanding Belance		
33985 Blue Heron Dr. 10,748.00													
	State	Zip Code	La	me Rece	lved T	Tala Peri	ied .	Pays					ats This Period
		44139		Dage Amount			Date Amount						
C	M 7	1 2 0 4	М	O		Y	s	M		D	٧	3	
Registration Number, if PAC			М	D		Y		M		D	1	T	
Employer/Occupation/Labor Organization*			M	D		Y		м		D	Y	T	
From Whom Received								Prio	Ame	equal (7	Arm. Incurred this Period
Greg Brown						<u> </u>	_	29,	300.00) [0.00		
Address Contrinuing Balance 29,300,00 29,300,00													
	State	Zip Code	Le	ses Rece		Nie Peri	-d	Г			Pag	year	on This Period
Cleveland	H	44114		Date			Amount			Dute			Amuent
	M 7	D Y 2 2 0 4	М	D		Y	S	M		D	Y	\$	
Registration Number, if PAC			М	D		Y		M		D	Y	T	
Employed/Occupation/Labor Organization*			М	D		Y		М		D	Y		
From Whom Received								Prim	Amo			- 1	Amt. Incurred this Period
Eric Brown						_		13,0	00.00		0.00		
Address Outstanding Balance 13,000.00 1													
	State	Zip Code	1.	- P	7	Ada Burd		-			Per	_	on This Period
		44122	Losan Reneived Thin Period Desc Amoust			Date Amount							
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the second second second 1	0	1 1 1 1		$oldsymbol{\perp}$	L							\perp	
Registration Number, if PAC			M	D	\rfloor	Y		M		D	Y		
Employer/Occupation/Labor Organization*			М	D		Y		M		D	Y	floor	

It's loan is forgives, write "Forgives" 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 Exponditures (Form No. 31-B). Transfer Total Outstanding Balance to the cover page (Form No. 30-A).

1	Total prior assount \$	53,048.00	
2	Total received this period \$	0.00	(To Furst No. 31-A-2)
3	Total Payments this Period S	0.00	(also record on Form 31-B)
4	Total Cutstanding Balance S	53,048.00	(To Farm No. 30-A)

Required for contributions over \$100 to studewide and general assembly canalidates. If contributor is self-employed, occupation and the name of the individual's business, if any, nather than employer should be listed. If two ormore controves downto via psyroll 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)