31-C
R.C. 3517.10

Page _	1

Statement of Loans Received

						Pre	scribed	d by S	ecreti	агус	f State3/05										
Full Name of Committee										_									<u>-</u>		
CITIZENS FOR CARE	<u>rier</u>																				
From Whom Received													Prior A	moun				Amt	.Incurred t	ns Period	
FRANK CARRIER & HEATHER YARBROUGH-CARRIER							- 1	5,400.00						0.00							
Address 4394 SHIRE CREEK C	т											1		•				Outs	tanding Bal		
City	State	ZipC	orde									4					-				00.00
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Employer/Occupation/Labor Organization*					1	_	-	4.		4	0).		\perp		┖					
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City	State	ZipC	ode	Ĩ	L	oans l	Receiv	ved TI	is Pe	riod		┪	Payments This Period								
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Employer/Occupation/Labor Organization*					М		Ď	1	T	T		1	М	ī)	Y	ĺ	f			
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* Required for contributions over \$100 to statewing	le and re	voral acc	ambh.co-	schilate -	16ac		- محد سم	LC av-	dan er d					,							
if any, rather than employer should be listed. If nor	~ ana ga ormore:	emplove	es donate	VIA DOVI	rollder	ductics ductics	n ande	a-ciil]	nuyed Ithe n	L UCC	upation and the name of the topos of the topos	axt viza	vicuals	OUSING Object	ess,						
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)																					
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If a loan is for given, write "For given" in the "Outst	andine Re	alance" «	pace Tra	msfer to	talofa	all kvan	srecei	ived th	is ner	icyl t	othe Statement of Other Inc		e/Form	No 1	1_4 2\						
Transfer total of all payments made in this period to	othe Stat	ement o	f Expendi	tures (Fe	orm N	In 31-1	3) Trai	nefer	Lotali Lotali	Oute	tanding Palance to the cores		en (Euro	:: 40.2 Ma	20 AN	•					

1	Total prior amount \$	5,400.00	
2	Total received this period \$	0.00	(To Form No. 31-A-2)
3	Total Payments this Period\$	0.00	(also record on Form 31-1
4	Total Outstanding Balance \$	5,400.00	(To Form No. 30-A)