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## **Statement of Loans Received**

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Page		

			Prescrib	ed by Sec	retary o	f State 3/05				
Full Name of Committee Committee To Elect Judge	e Maynar	d								
From Whom Received William Dwayne Maynard							Prior An \$11	,570.0	0	Amt. Incurred this Period \$0.00
Address 7903 Wiltshire Court							77 S		Outstanding Balance \$11,570.00	
City Dublin	St ate OH	Zip Code 43016	Loans Received This Period  Date Amount		Payments This Period  Date Amount					
Date Loan was originally Incurred	0 3	1 0 0 7	M	D	Ĭ	S	М	D	Y	S
Registration Number, if PAC			M	Ď	Y		M	D	Y	
Employer/Occupation/Labor Organization*			М	D	Y		М	D	Y	
From Whom Received							Prior An	nount		Amt. Incurred this Period
Address Outstanding Balance							Outstanding Balance			
City	St ate OH	Zip Code	I	<b>Lea</b> n Date	ıs Recei	ved This Period Amount		Date	Payments	This Period Amount
Date Loan was originally Incurred	M	D Y	М	D	Y	S	М	D	Y	S
Registration Number, if PAC			М	D	Y		М	D	Y	
Employer/Occupation/Labor Organization*			M	D	Y		М	D	Y	
From Whom Received					<del></del>		Prior An	nount		Amt, Incurred this Period
Address						Outstanding Balance				
City	St ate OH	Zip Code	Loans Received This Period Date Amount			Date	Payments	This Period Amount		
Date Loan was originally Incurred	M	D Y	M	D	Y	S	М	D	Y	s
Registration Number, if PAC			М	D	Y		М	P	Y	
Employer/Occupation/Labor Organization*			М	D	Y		М	D	Y	
* 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 \$ \$11,570.00	
<sup>2</sup> Total received this period \$\$0.00	(To Form No. 31-A-2)
<sup>3</sup> Total payments this period \$ \$0.00	(To Form No. 31-B)
<sup>4</sup> Total Outstanding Balance S \$11,570	).00 (To Form No. 30-A)