Statement of Loans Received

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Prescribed by Secretary of State 3/05

			riescito	ed by sec	iciary or	State 3/03				
Full Name of Committee Woods for Judge Committee	ee		-							
From Whom Received William H. Woods)	Amt. Incurred this Period \$0.00
Address 1022 Blind Brook Drive									ř	Outstanding Balance \$10,000.00
City Columbus	State OH	Zip Code 43235	Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred	1 0	0 3 1 4	M	D	Y	\$0.00	0 7	0 8	1 5	\$ \$5,419.91
Registration Number, if PAC			M	D	Y		M	D	Yudinani	
Employer/Occupation/Labor Organization*			М	D	Y		M	P	Y	
From Whom Received		,					Prior An	ount	•	Amt. Incurred this Period
Address				•						Outstanding Balance
City	St ate OH	Zip Code	Loans Received This Period Date Amount			Payments This Period Date Amount				
Date Loan was	М	D Y	М	D	Y	s	M	D	Y	s
Registration Number, if PAC		, , , , , , , , , , , , , , , , , , ,	M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization	1*	·	М	D	Y		М	D	Yumana	
From Whom Received				•			Prior An	ount		Amt, Incurred this Period
Address				•						Outstanding Balance
City	St ate OH	Zip Code	Loans Received This Period Date Amount			Payments This Period Date Amount				
Date Loan was	М	D Y	M	В	Y	S	M	D	Y	S
Registration Number, if PAC			M	D	Y		M	D	Tuesday.	
Employer/Occupation/Labor Organization*			M	D	Y		M	D	Y	
 Required for contributions from inc 	lividuals o	ver \$100 to statewid	e and ge	eneral as:	embly	candidates. If contribut	or is self-	employed	i, the occ	upation and the name of

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).

¹ Total prior amount \$\$10	0,000.00	
² Total received this period \$	\$0.00	_(To Form No. 31-A-2)
³ Total payments this period \$ _	\$5,419.91	(To Form No. 31-B)
⁴ Total Outstanding Balance \$ _	Forgiven	(To Form No. 30-A)

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)]