

# Statement of Loans Received

Prescribed by Secretary of State 3/05

|  |  |                    |                          |   |   |   |   |                                 |                                     |  |   |      |
|--|--|--------------------|--------------------------|---|---|---|---|---------------------------------|-------------------------------------|--|---|------|
| Full Name of Committee<br><b>Friends of Randy Reisling</b> |  |                    |                          |   |   |   |   |                                 |                                     |  |   |      |
| From Whom Received<br><b>Randy Reisling</b>                |  |                    |                          |   |   |   |   | Prior Amount<br><b>3,000.00</b> |                                     | Amt. Incurred this Period<br><b>1,000.00</b> |   |      |
| Address<br><b>3178 Ranke Ct</b>                            |  |                    |                          |   |   |   |   |                                 |                                     | Outstanding Balance<br><b>4,000.00</b>       |   |      |
| City<br><b>Grove City</b>                                  |  | State<br><b>OH</b> | Zip Code<br><b>43123</b> |   | Loans Received This Period<br>Date Amount |   |   |                                 | Payments This Period<br>Date Amount |  |   |      |
| Date Loan was originally Incurred                          |  | M                  | D                        | Y | M   | D | Y | \$                              | M                                   | D  | Y | \$   |
|  |  | 0                  | 9                        | 1 | 1   | 0 | 2 | 9                               | 0                                   | 7  |   | 1000 |
| Registration Number, if PAC                                |  |                    |                          |   | M   | D | Y |                                 | M                                   | D  | Y |      |
| Employer/Occupation/Labor Organization*                    |  |                    |                          |   | M   | D | Y |                                 | M                                   | D  | Y |      |
| <b>MacAulav Brown, Inc.</b>                                |  |                    |                          |   |   |   |   |                                 |                                     |  |   |      |
| From Whom Received   |  |                    |                          |   |   |   |   | Prior Amount                    |                                     | Amt. Incurred this Period                    |   |      |
| Address  |  |                    |                          |   |   |   |   |                                 |                                     | Outstanding Balance                          |   |      |
| City   |  | State              | Zip Code                 |   | Loans Received This Period<br>Date Amount |   |   |                                 | Payments This Period<br>Date Amount |  |   |      |
| Date Loan was originally Incurred                          |  | M                  | D                        | Y | M   | D | Y | \$                              | M                                   | D  | Y | \$   |
|  |  |                    |                          |   |   |   |   |                                 |                                     |  |   |      |
| Registration Number, if PAC                                |  |                    |                          |   | M   | D | Y |                                 | M                                   | D  | Y |      |
| Employer/Occupation/Labor Organization*                    |  |                    |                          |   | M   | D | Y |                                 | M                                   | D  | Y |      |
|  |  |                    |                          |   |   |   |   |                                 |                                     |  |   |      |
| From Whom Received   |  |                    |                          |   |   |   |   | Prior Amount                    |                                     | Amt. Incurred this Period                    |   |      |
| Address  |  |                    |                          |   |   |   |   |                                 |                                     | Outstanding Balance                          |   |      |
| City   |  | State              | Zip Code                 |   | Loans Received This Period<br>Date Amount |   |   |                                 | Payments This Period<br>Date Amount |  |   |      |
| Date Loan was originally Incurred                          |  | M                  | D                        | Y | M   | D | Y | \$                              | M                                   | D  | Y | \$   |
|  |  |                    |                          |   |   |   |   |                                 |                                     |  |   |      |
| Registration Number, if PAC                                |  |                    |                          |   | M   | D | Y |                                 | M                                   | D  | Y |      |
| Employer/Occupation/Labor Organization*                    |  |                    |                          |   | M   | D | Y |                                 | M                                   | D  | Y |      |
|  |  |                    |                          |   |   |   |   |                                 |                                     |  |   |      |

\* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more 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)

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 Total Outstanding Balance to the cover page (Form No. 30-A).

- Total prior amount \$ 3,000.00
- Total received this period \$ 1,000.00 (To Form No. 31-A-2)
- Total Payments this Period \$ 0.00 (also record on Form 31-B)
- Total Outstanding Balance \$ 4,000.00 (To Form No. 30-A)