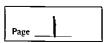
Statement of Loans Received



				rrescri	sea by Sea	retary of	State 3/05					
Friends to Elec	ct Pe	rkins										
Prom whom Received	line							Prior At	^{™ount} 188-4:	2	Amt. Incurred this Period	
Address 1580 Helrose Aue City Columbus OH 43224											Outstanding Balance	
Columbus	State Zip Code OH 43224				Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred	м Ø	ø 5		M	D	Y	s	М	D	Y	S	
Registration Number, if PAC				М	D	Y		M	D	Y		
Employer/Occupation/Labor Organization*					D	Y		M	D	Y		
From Whom Received					```			Prior A	nount	<u> </u>	Amt. Incurred this Period	
Address							,c.,-	r ,			Outstanding Balance	
City	St ate	Zip Code	1	Loans Received This Period Date Amount				Payments This Period Date Amount				
Date Loan was	М	D	Y	M	D	Y	s	M	D	Y	S	
Registration Number, if PAC	<u> </u>	l . <u>!</u>	1 1	M	D	Y		М	D	Y		
Employer/Occupation/Labor Organization*					D	Y		M	D	Y		
From Whom Received				<u> </u>	, .	<u>, .</u>	·	Prior A	nount		Amt. Incurred this Period	
Address		-								ા કર મન્	Outstanding Balance	
City	St ate Zip Code			Loans Received This Period Date Amount				Payments This Period Date Amount				
Date Loan was originally incurred	M	D	Y	M	D	Y	S	M	D	Y	S	
Registration Number, if PAC				M	D	Y	<u>"</u>	M	D	Y		
Employer/Occupation/Labor Organization*				M	D	Y		M	D.	Y		
* Required for contributions from inc the individual's business, if any, rath labor organization of which the emp	her than en	nployer sh	ould be li	sted. If t	wo or me	ore emp	loyees contribute via					
If a loan is forgiven, write "Forgi Income (Form No. 31-A-2). Tran Balance to the Cover page (Form	sfer total	of all pay	tanding I rments m	Balance nade in 1	" space. this peri	Trans od to ti	fer total of all loans ne Statement of Exp	received enditure:	I this peri s (Form N	od to th No. 31-E	e Statement of Other 3). Transfer Outstanding	
¹ Total prior amount \$			-									
² Total received this period \$	•			_(To Fo	orm No.	31-A-	2)					
³ Total navments this period \$ (To Form No. 31-R)												

⁴ Total Outstanding Balance \$ 3, 288 · 42 (To Form No. 30-A)