Statement of Loans Received

Prescribed by Secretary of State3/05

					escribed b	y occitia								
Full Name of Committee		•												
Citizens for Brian Lar	ick													
From Whom Received							Prior Amount				Amt. Incurred this Period			
Brian Larick						4,400.00				0.00				
Address													Outstanding Balance	
774 Hunters Glen Dr			_						,			•	4,400.00	
City	State	Zip Cod	e	Loans Received This Period				Payments This Period						
Gahanna	OH	4323	0		Date			Amount	Date			е	Amount	
Date Loan was originally	M	D	Y	М	D	Y	s		M		D	Y	s	
Incurred	0 6	1 2	1 3									<u> </u>		
Registration Number, if PAC	·			M	D	Y			М		D	Y		
			_											
Employer/Occupation/Labor Organization	*			M	D	Y	T		М	- 1	D	Y		
From Whom Received									Prior Amount				Amt, Incurred this Period	
Address													Outstanding Balance	
City State Zip Code				Loans Received This Period					Payments This Period					
		ŀ		ļ	Date			Amount			Dat		Amount	
Date Loan was originally	М	D	Y	M	D	Y	\$		М	i	D	Y	S	
Incurred	1													
Registration Number, if PAC				М	D	Y			M		D	Y		
							_						<u> </u>	
Employer/Occupation/Labor Organization*			М	D	Y			M		D	Y			
											<u> </u>			
From Whom Received				_					Prior	Am	ount		Amt. Incurred this Period	
													<u></u>	
Address										į.		-	Outstanding Balance	
								_		· ·				
City State Zip Code			Loans Received This Period					Payments				nents This Period		
				1	Date			Amount			Dat	te	Amount	
Date Loan was originally	M	D	Y	M	D	Y	S		M		D	Y	\$	
Incurred	i	1 1												
Registration Number, if PAC				М	D	Y			М		D	Y		
							\perp							
Employer/Occupation/Labor Organization	1*			М	D	Y	T		М		D	Y		
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					10		15	ployed occupation	n and the s	name	of the in	adividual's	husiness	

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	o. 30-A).

1	Total prior amount \$	4,400.00	
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-B)
4	Total Outstanding Balance S	4,400.00	(To Fonn No. 30-A)

^{*} 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 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)