

Statement of Loans Received

Prescribed by Secretary of State 3/05

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|--|--|--------------------|--------------------------|--|---|---|---|-----------------------------|--|--|---|---|
| Full Name of Committee Friends of Randy Reisling | | | | | | | | | | | | |
| From Whom Received Randy Reisling | | | | | | | | Prior Amount 0.00 | | Amt. Incurred this Period 3,000.00 | | |
| Address 3178 Ranke Ct | | | | | | | | | | Outstanding Balance 3,000.00 | | |
| City Grove City | | State OH | Zip Code 43123 | Loans Received This Period Date 0 9 1 1 0 1 7 | | | | Amount 3000 | | Payments This Period Date 0 9 1 1 0 1 7 | | |
| Date Loan was originally Incurred | | M | D | Y | M | D | Y | \$ | | M | D | Y |
| Registration Number, if PAC | | | | | | | | | | | | |
| Employer/Occupation/Labor Organization* | | | | | | | | | | | | |
| MacAulay Brown, Inc. | | | | | | | | | | | | |
| From Whom Received | | | | | | | | Prior Amount | | Amt. Incurred this Period | | |
| Address | | | | | | | | | | Outstanding Balance | | |
| City | | State | Zip Code | Loans Received This Period Date | | | | Amount | | Payments This Period Date | | |
| Date Loan was originally Incurred | | M | D | Y | M | D | Y | \$ | | M | D | Y |
| Registration Number, if PAC | | | | | | | | | | | | |
| Employer/Occupation/Labor Organization* | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| From Whom Received | | | | | | | | Prior Amount | | Amt. Incurred this Period | | |
| Address | | | | | | | | | | Outstanding Balance | | |
| City | | State | Zip Code | Loans Received This Period Date | | | | Amount | | Payments This Period Date | | |
| Date Loan was originally Incurred | | M | D | Y | M | D | Y | \$ | | M | D | Y |
| Registration Number, if PAC | | | | | | | | | | | | |
| Employer/Occupation/Labor Organization* | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| From Whom Received | | | | | | | | Prior Amount | | Amt. Incurred this Period | | |
| Address | | | | | | | | | | Outstanding Balance | | |
| City | | State | Zip Code | Loans Received This Period Date | | | | Amount | | Payments This Period Date | | |
| Date Loan was originally Incurred | | M | D | Y | M | D | Y | \$ | | M | D | Y |
| Registration Number, if PAC | | | | | | | | | | | | |
| Employer/Occupation/Labor Organization* | | | | | | | | | | | | |
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* 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 \$ 0.00
- Total received this period \$ 3,000.00 (To Form No. 31-A-2)
- Total Payments this Period \$ 0.00 (also record on Form 31-B)
- Total Outstanding Balance \$ 3,000.00 (To Form No. 30-A)