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Statement of Loans Received

Prescribed by Secretary of State3/05

5 H.V. 1 GO 11			•						_			
Full Name of Committee												
Citizens for Demro							In.					
From Whom Received							Prior Amount				Amt. Incurred this Period	
Ryan Demro							┸-		_		0 15 15	29.00
Address TOO IAT: 11 IAT							4				Outstanding Bal	
598 Wickham Way	1		_								L	29.00
City State Gahanna O F	Zip Code H 4323 0	Loans Received This Period Date Amount				Amount	Payments This Period Date Amount					
Date Loan was originally M	D Y	M	D	Y	S		М		D	Y	ls.	
Incurred 0	1 1 1				ľ				Ĭ			
Registration Number, if PAC		M	D 	Y			М		Đ 	Y		
Employer/Occupation/Labor Organization*		М	D 	Y 			М			Y		
From Whom Received							Prior	Am	ount		Amt. Incurred th	nis Period
Andrea Demro							ı					194.57
Address										- F	Outstanding Bal	
598 Wickham Way												194.57
City State		Loa	ns Receiv	ed This	Period		Payments This Period					
Gahanna OH	1 43230		Date Amount				Date					nount
Date Loan was originally M	D Y	М	D	Y	S		М		D	Y	\$	<u>_</u>
Incurred 0 7	7 0 2 1 3											
Registration Number, if PAC		М	D	Y			М		_ D 	Y		
Employer/Occupation/Labor Organization*		M	D 	Y		· · · · · · · · · · · · · · · · · · ·	М		D	Y		
From Whom Received	**************************************						Prio	r Am	ount		Amt. Incurred th	his Period
Ryan Demro							ŀ					1,600.00
Address	· · · · · · · · · · · · · · · · · · ·		_					•			Outstanding Bal	lance
598 Wickham Way							5 2	٠,				1,600.00
City State		Loa	ns Receiv	ed This	Period						ents This Period	
Gahanna Ol H	H 43230	Date Amount				┸		Date		An	nount	
Date Loan was originally M	D Y	M	D	Y	s		М		D	Y	\$	
	9 3 0 1 3				_		┸					
Registration Number, if PAC		М	D	Y			М		D	Y		
Employer/Occupation/Labor Organization*	· · · · · · · · · · · · · · · · · · ·	М	D	Y			М		D	Y		
										<u> </u>	<u>. </u>	
* Required for contributions over \$100 to statewide	and general assembly	candidat	es. If cont	ributor is	self-emplo	ved, occupation a	nd the	name	of the in	dividual's	business.	

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).

1	Total prior amount \$	0.00
2	Total received this period \$	1,823.57 (To Form No. 31-A-2)
3	Total Payments this Period \$	(also record on Form 31-B)
4	Total Outstanding Balance \$	

^{*} 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)