

Total Outstanding Balance \$ 1568.33

## **Statement of Loans Received**

Form 31 (

R.C. 3517.10

Full Name of Committee Daphne Moehring for Gaha	anna Ga	hanna School B	Board				
From Whom Received	Prior Amount	Amt. Incurred this Period					
Daphne Moehring					230.74	<b>\$</b> 1337.59	
Street Address						Outsta	nding Balance
441 Lily Pond Ct						<b>\$</b> 156	8.33
City	State	Zip Code			_		
Gahanna	он	43230	Loans Received T	his Period	Payments This Period		Period
Date Loan was Originally Incurred (MM/DD/YYYY)			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DI	D/YYYY)	Amount
		10/16/2015	07/11/19	750.00			
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DI	D/YYYY)	Amount
			10/19/19	587.59			
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DI	OMYYY)	Amount
From Whom Received					Prior Amount	Amt. In	curred this Period
Street Address						Outsta	nding Balance
City	State	Zip Code	Loans Received Ti	nis Period	Payments This Period		Period
Date Loan was Originally Incurred (MM/DD/YYYY)			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD	OMYYY)	Amount
Registration Number, if PAC			D. 4. 44. (AMARDA 8 10 2 2			- 1	
registration rumber, in the			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD	DYYYY)	Amount
Employer/Occupation/Labor Organ	nization*		Date of Loan (MM/DD/YYYY)  Date of Loan (MM/DD/YYYY)		Date of Payment (MM/DD		
* Required for contributions from in name of the individual's business, i aggregate of \$100, the labor organilf a loan is forgiven, write "Forgiven (Form No. 31-A-2). Transfer total or	dividuals of if any, rath ization of v	er than employer sh which the employee utstanding Balance	Date of Loan (MM/DD/YYYY)  ide and general assembly canould be listed. If two or more essare members, if any, must also space. Transfer total of all load	Amount  didates. If contribute amployees contribute so appear. [R.C. 3]	Date of Payment (MM/DD tor is self-employed, the ute via payroll deduction 3517.10(B)(4)]	e occupa	Amount tion and the ceed the
* Required for contributions from in name of the individual's business, i aggregate of \$100, the labor organilf a loan is forgiven, write *Forgiven (Form No. 31-A-2). Transfer total or	dividuals of if any, rath- ization of v and in the "O f all payme	er than employer sh which the employee utstanding Balance	Date of Loan (MM/DD/YYYY)  ide and general assembly canould be listed. If two or more essare members, if any, must also space. Transfer total of all load	Amount  didates. If contribute amployees contribute so appear. [R.C. 3]	Date of Payment (MM/DD tor is self-employed, the ute via payroll deduction 3517.10(B)(4)]	e occupa	Amount tion and the ceed the
* Required for contributions from in name of the individual's business, i aggregate of \$100, the labor organilf a loan is forgiven, write "Forgiven (Form No. 31-A-2). Transfer total of Cover page (Form No. 30-A).	idividuals of if any, rath- ization of v " in the "O f all payme	er than employer she which the employee utstanding Balance ents made in this pe	Date of Loan (MM/DD/YYYY)  ide and general assembly cano hould be listed. If two or more e is are members, if any, must als " space. Transfer total of all load riod to the Statement of Expen	Amount  didates. If contribute amployees contribute so appear. [R.C. 3]	Date of Payment (MM/DE tor is self-employed, the ute via payroll deduction 3517.10(B)(4)] period to the Statement of 31-B). Transfer Outstan	e occupa	Amount  Ition and the ceed the

(also record on Form 30-A)