## Statement of Loans Received

|  |                            |                       |                            | Prescribe                              | d by Sec                                  | retary of          | State 3/05              |                                  |                             |                                     |           |                                     |  |
|--|----------------------------|-----------------------|----------------------------|--|---|--------------------|-------------------------|----------------------------------|-----------------------------|-------------------------------------|-----------|-------------------------------------|--|
| Full Name of Committee Committee for Kim Bro   | wn for                     | Judge                 |                            |  |   |                    |                         |                                  |                             |                                     |           |                                     |  |
| From Whom Received Kimberly J. Brown - Candidate   |                            |                       |                            |  |   |                    |                         |                                  | Prior Amount<br>\$55,100.00 |                                     |           | Amt. Incurred this Period<br>\$0.00 |  |
| Address<br>106 N. High Street  |                            |                       |                            |  |   |                    |                         |                                  |                             |                                     |           | Outstanding Balance<br>\$55,100.00  |  |
| City<br>Columbus   | St ate                     | · I I                 |                            |  | Loans Received This Period<br>Date Amount |                    |                         |                                  |                             | Payments This Period<br>Date Amount |           |                                     |  |
| Date Loan was  | 0 1                        | 0 3                   | 1 2                        | M                                      | D   | Y                  | s                       |                                  | М                           | D                                   | Y         | S                                   |  |
| Registration Number, if PAC  |                            |                       | ,                          | M                                      | D   | Y                  |                         |                                  | M                           | D                                   | Y         |                                     |  |
| Employer/Occupation/Labor Organization* Attorney/Judicial Candidate  |                            |                       |                            | M                                      | D   | Y                  |                         |                                  | M                           | D                                   | Y         |                                     |  |
| From Whom Received   |                            |                       | -                          |  | *   |                    |                         |                                  | Prior An                    | nount                               |           | Amt. Incurred this Period           |  |
| Address  |                            |                       |                            |  |   | -                  | <del></del>             |                                  |                             |                                     |           | Outstanding Balance                 |  |
| City   | St ate   Zip Code OH       |                       |                            |  | Loans Received This Period Date Amount    |                    |                         |                                  |                             | Payments This Period Date Amount    |           |                                     |  |
| Date Loan was  | M                          | D                     | Y                          | M                                      | D   | Ý                  | S                       |                                  | M                           | D                                   | Y         |                                     |  |
| Registration Number, if PAC  |                            | <u> </u>              | <u> </u>                   | M                                      | D   | Y                  |                         |                                  | M                           | D                                   | Y         |                                     |  |
| Employer/Occupation/Labor Organizatio  | n"                         |                       |                            | M                                      | D   | Y                  |                         |                                  | M                           | D                                   | Y         | ,                                   |  |
| From Whom Received   |                            |                       |                            | <u> </u>                               | <u></u>                                   | 1                  |                         |                                  | Prior An                    | nount                               |           | Amt. Incurred this Period           |  |
| Address  |                            |                       |                            |  |   |                    |                         |                                  |                             |                                     |           | Outstanding Balance                 |  |
| City   | St ate Zip Code            |                       |                            | Loans Received This Period Date Amount |   |                    |                         | Payments This Period Date Amount |                             |                                     |           |                                     |  |
| Date Loan was<br>originally Incurred   | М                          | D                     | \`                         | M                                      | D   | Y                  | S                       |                                  | M                           | D                                   | Y         | S                                   |  |
| Registration Number, if PAC  |                            | -                     |                            | M                                      | D   | Y                  |                         |                                  | М                           | Đ                                   | Y         |                                     |  |
| Employer/Occupation/Labor Organization*  |                            |                       |                            | M                                      | D   | Y                  |                         |                                  | M                           | D                                   | Y         |                                     |  |
| * Required for contributions from in<br>the individual's business, if any, rat<br>labor organization of which the em | her than er<br>ployees are | nployer sh<br>members | ould be lis<br>, if any, m | ited. If to<br>ust also                | vo or mo<br>appear.                       | ore emp<br>[R.C. 3 | loyees con<br>517.10(B) | ntribute via pa<br>(4)]          | ayroll dec                  | luction ar                          | nd exceed | the aggregate of \$100, the         |  |

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 Outstanding Balance to the Cover page (Form No. 30-A).

| <sup>1</sup> Total prior amount \$\$55       |             |                      |
|--|-------------|----------------------|
| <sup>2</sup> Total received this period \$   | \$0.00      | (To Form No. 31-A-2) |
| <sup>3</sup> Total payments this period \$ _ | \$0.00      | (To Form No. 31-B)   |
| <sup>4</sup> Total Outstanding Balance \$ _  | \$55,100.00 | (To Form No. 30-A)   |