

FOR PAPER FILING ONLY
Statement of Loans Received

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Prescribed by Secretary of State 3/05

Full Name of Contributor Brown for Board of Education											
From Whom Received Evan Brown								Prior Amount 10,748.00		Amt. Incurred this Period 0.00	
Address 33985 Blue Heron Dr.										Outstanding Balance 10,748.00	
City Solon		State OH		Zip Code 44139		Loans Received This Period Date Amount			Payments This Period Date Amount		
		M D Y		M D Y		M D Y \$			M D Y \$		
		0 7 1 2 0 4									
Registration Number, if PAC						M D Y			M D Y		
Employer/Occupation/Labor Organization*						M D Y			M D Y		
From Whom Received Greg Brown								Prior Amount 29,300.00		Amt. Incurred this Period 0.00	
Address 3901 Superior Ave E										Outstanding Balance 29,300.00	
City Cleveland		State OH		Zip Code 44114		Loans Received This Period Date Amount			Payments This Period Date Amount		
		M D Y		M D Y		M D Y \$			M D Y \$		
		0 7 2 2 0 4									
Registration Number, if PAC						M D Y			M D Y		
Employer/Occupation/Labor Organization*						M D Y			M D Y		
From Whom Received Eric Brown								Prior Amount 13,000.00		Amt. Incurred this Period 0.00	
Address 34 W Poplar Ave										Outstanding Balance 13,000.00	
City Beachwood		State OH		Zip Code 44122		Loans Received This Period Date Amount			Payments This Period Date Amount		
		M D Y		M D Y		M D Y \$			M D Y \$		
		1 0 1 1 1 1									
Registration Number, if PAC						M D Y			M D Y		
Employer/Occupation/Labor Organization*						M D Y			M D Y		

* 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 employers 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).

- 1 Total prior amount \$ 53,048.00
- 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 \$ 53,048.00 (To Form No. 30-A)