31	-C	
R.C.	351	7.10

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Statement of Loans Received

Prescribed by Secretary of State3/05

							veren programmi mi								
Full Name of Committee															
Friends for Ginther										and the second s		20000000000000000000000000000000000000			
From Whom Received		deniman								Prior An	nount		Amt. Inci	ırred this Period	
Andrew Ginther												0.00		2,000.00	
Address													Outstand	ling Balance	
98 Montrose Way														0.00	
City	State	e Z	ip Code		l na	ns Receiv	ed Th	is P	eriod	Payments This Period					
Columbus			13214			Date			Amount		Dat	-	Amount		
	М	+	D Y	М	ı	D	ΙΥ		\$	М	D	ΤΥ	\$		
Date Loan was originally	3	3	0 1 0 9	8	3	0 1	0	9	2000.00	1	2 1	0 9		2000.00	
Incurred Registration Number, if PAC	0 1		0 1 0 3	M		D	Y	-	2000.00	M	D	Y	 	2000000	
Registration Number, if PAC				101			'								
				٠,		D	Y		**************************************	М	D	+	-		
Employer/Occupation/Labor Organization				М	4					IVI					
Community Relations Co	oran	nai	Or							ļ			L		
From Whom Received										Prior An	nount		Amt. Inci	urred this Period	
Address													Outstand	ding Balance	
City	Stat	e Z	Zip Code		Loa	ıns Recei	ved Th	nis P	eriod			Paym	nents This Period		
THE PROPERTY OF THE PROPERTY O						Date			Amount		Dat	:e		Amount	
Date Loan was originally	М		D Y	Ν	1	D	Y		\$	М	D	Y	\$		
Incurred												200			
Registration Number, if PAC	a			Ν	1	D	Y			М	D	Y			
							-								
Employer/Occupation/Labor Organization	on*	··········	****	- N	1	D	Y			М	D	Y			
From Whom Received				<u> </u>	***********	J.		on waterin		Prior Ar	nount		Amt. Inc	urred this Period	
Trom Whom Recoived															
Address									<u></u>				Outstand	ding Balance	
Addiess														and animos	
City	Stat	<u> </u>	Zip Code	_	1	D			N			Down	Norto Thio	Daried	
City	State Zip Code Loans Receiv				Received This Period Date Amount				Dat	•	ents This Period Amount				
	М	+	D Y		4	Date	ΙΥ		\$	М	T D	TY	\$	Amount	
Date Loan was originally	IVI			1	11		1 1		Ψ.	1		'	4		
Incurred						 	1				D	1	<u> </u>		
Registration Number, if PAC				٨	1	D	Y		100 144 145	М	ט	Y			
					<u> </u>		1								
Employer/Occupation/Labor Organizati	on*			١	1	D	Y			М	D	Y			
		Sustantia													
* Required for contributions over \$100 if any, rather than employer should be the employees are members, if any, mu	listed. I	ftw	o ormore empl	oyees											
If a loan is forgiven, write "Forgiven" in Transfer total of all payments made in															
Total prior amount \$			0.00)											
² Total received this period \$	2,000.00				_ (To Fo	(To Form No. 31-A-2)									
³ Total Payments this Period \$	2,000.00				_ (also r	(also record on Form 31-B)									
4 Total Outstanding Balance \$	0.00				(To Fo	(To Form No. 30-A)									