

Statement of Loans Received

Prescribed by Secretary of State 3/05

| | | | | | | | | | | | | | | | | |
|------------------------------------------------------|--|--------------------|---|--------------------------|---|-------------------------------------------|---|-------------------------------|--|------------------------------------------|---|---|---|----|-------------|--|
| Full Name of Committee Citizens for Harris | | | | | | | | | | | | | | | | |
| From Whom Received Richard E. Harris | | | | | | | | Prior Amount 700.00 | | Amt. Incurred this Period 0.00 | | | | | | |
| Address 1100 Bedlington Court | | | | | | | | | | Outstanding Balance 700.00 | | | | | | |
| City Reynoldsburg | | State OH | | Zip Code 43068 | | Loans Received This Period Date Amount | | | | Payments This Period Date Amount | | | | | | |
| Date Loan was originally Incurred | | M | D | Y | M | D | Y | \$ | | | M | D | Y | \$ | | |
| 0 3 0 1 0 5 | | | | | | | | 0.00 | | | | | | | 0.00 | |
| Registration Number, if PAC | | | | | M | D | Y | | | M | D | Y | | | | |
| Employer/Occupation/Labor Organization* | | | | | M | D | Y | | | M | D | Y | | | | |

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|-----------------------------------------|--|-------|---|----------|---|-------------------------------------------|---|--------------|--|-------------------------------------|---|---|---|----|--|--|
| From Whom Received | | | | | | | | Prior Amount | | Amt. Incurred this Period | | | | | | |
| Address | | | | | | | | | | Outstanding Balance | | | | | | |
| City | | State | | Zip Code | | Loans Received This Period Date Amount | | | | Payments This Period Date Amount | | | | | | |
| Date Loan was originally Incurred | | M | D | Y | M | D | Y | \$ | | | M | D | Y | \$ | | |
| | | | | | | | | | | | | | | | | |
| Registration Number, if PAC | | | | | M | D | Y | | | M | D | Y | | | | |
| Employer/Occupation/Labor Organization* | | | | | M | D | Y | | | M | D | Y | | | | |

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|-----------------------------------------|--|-------|---|----------|---|-------------------------------------------|---|--------------|--|-------------------------------------|---|---|---|----|--|--|
| From Whom Received | | | | | | | | Prior Amount | | Amt. Incurred this Period | | | | | | |
| Address | | | | | | | | | | Outstanding Balance | | | | | | |
| City | | State | | Zip Code | | Loans Received This Period Date Amount | | | | Payments This Period Date Amount | | | | | | |
| Date Loan was originally Incurred | | M | D | Y | M | D | Y | \$ | | | M | D | Y | \$ | | |
| | | | | | | | | | | | | | | | | |
| 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 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)

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).

- Total prior amount \$ 700.00
- Total received this period \$ 0.00 (To Form No. 31-A-2)
- Total Payments this Period \$ 0.00 (also record on Form 31-B)
- Total Outstanding Balance \$ 700.00 (To Form No. 30-A)