3	1 -	C				
R.	C.	35	ı	7	. 1	0

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Statement of Loans Received

				Pr	escribed b	y Secreta	ıry of Sta	te3/ 0 5					
Full Name of Committee				-				•					
Baker for the Board				_									
From Whom Received								•		Prior An	iount		Amt. Incurred this Period
Diane Wendel Baker											1,4	50.00	0.00
Address													Outstanding Balance
2142 Staghorn Way													1,450.00
City	State	Zip Cod	e	Loz	ns Recei	ved This	Period					Pavm	ents This Period
Grove City	OIH	[4312]	3	Date Amount					Date			Amount	
Date Loan was originally	M	D	Y	M	Ď	Y	Ş			Mj	Đ	Y	\$
Incurred	10	310	017						0				•
Registration Number, if PAC				M	D	Y				M	D	Y	
					!] [_ {	
Employer/Occupation/Labor Organization	ı*			M	D	Y -				M	D	Y	
From Whom Received										Prior Amount Amt. Incurred this Period			
Address													Outstanding Balance
City	State	Zip Cod	e	1.02	Loans Received This Period					Pasm	ents This Period		
Date				Amount	Date				Amount				
Date Loan was originally	M	D	Y	Mj	D	Y	S			M	D	Y	S
Incurred									0			i	
Registration Number, if PAC	•	•	•	M	Đ	Y				M	D	Y	
Employer/Occupation/Labor Organization				M	D	Y	1			M	D	Y	
Employer/Occupation/Labor Organization				1,41	ľ	Ĺ					lί	'	
From Whom Received									Prior Amount			Amt, Incurred this Period	
Address													Outstanding Balance
City	State	Zip Cod	e	Loa	ıns Recei	ved This	Period				_	Paym	ents This Period
<u> </u>	11				Date			Amount			Dat	c	Amount
Date Loan was originally	M	D _.	Y	M	D	Y	S			M	D	Y	\$
Incurred		!	<u> </u>									<u> </u>	
Registration Number, if PAC				M!	D	Y				M	D I	Y	
2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				 	 !	+ '	-			1 1		1 !	
Employer/Occupation/Labor Organization*			M	D	'				MI	D	Y		
<u> </u>				<u> </u>	1 1	<u> </u>				1	l i	1	<u> </u>
		,					10		. ,		A.1 .		1 *
* Required for contributions over \$100 to		_					_						
if any, rather than employer should be list				mate via p	iaytou dec	duction at	nu excee	i ine aggregate	01 2100), the tabl	or organiz	ation of w	nicu

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance"	space. Transfer total of all loans received	d 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). Transfe	er Total Outstanding Balance to the cover page	(Form No. 30-A).

1	Total prior amount \$	1,450.00	
2	Total received this period \$	0.00	(To Form No. 31-A-2)
3	Total Payments this Period S	0.00	(also record on Form 31-I
4	Total Outstanding Balance \$	1,450.00	(To Form No. 30-A)