Statement of Loans Received



Prescribed by Secretary of State 3/05

	Prescribed by Secretary of	Sale 3/03			
Full Name of Committee Citizens to Elect Da	miller				
From Whom Received Dan Miller			Prior Amount	Amt. Incurred this Period	
Address Y124 May Clause Blu	1		olige (eggin glang	Outstanding Balance	
Address 4124 May Flower Blo City Whitehell 011 432	2 Loans Receiv	Loans Received This Period		Payments This Period	
Date Loan was originally Incurred	v n v	S #12,000	M D N	Amount \$	
Registration Number, if PAC	M D Y		M D Y	Y	
Employer Occupation/Labor Organization City of Whitehall	M D Y		M D Y	i	
From Whom Received Dan Miller Address			Prior Amount 2,000	Amt. Incurred this Period	
4124 Marflower Blud.				Outstanding Balance	
Address 4124 May Flower Bluc City Whitehall State Zip Code Whitehall OH 432	3 Loans Receive	Loans Received This Period Date Amount		Payments This Period Date Amount	
Date Loan was originally Incurred	Y 0 8 6 7 1 1	\$ #/	M D	Y S	
Registration Number, if PAC	M D Y		M D	Y	
Employer/Occupation/Labor Organization* C: 4 of Whitehall	M D Y		M D	Y	
From Whom Received	. , , , , , , , , , , , , , , , , , , ,		Prior Amount	Amt. Incurred this Period	
Address				Outstanding Balance	
City St ate Zip Code	Loans Receiv	Loans Received This Period Date Amount		Payments This Period Date Amount	
Date Loan was	Y M D Y	S	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 from individuals over \$100 to the individual's business, if any, rather than employer sho labor organization of which the employees are members, 	lld be listed. If two or more emp	oloyees contribute via pay	or is self-employed, the profit deduction and ex-	ne occupation and the name of sceed the aggregate of \$100, the	
If a loan is forgiven, write "Forgiven" in the "Outsta Income (Form No. 31-A-2). Transfer total of all pays Balance to the Cover page (Form No. 30-A).	nding Balance" space. Trans tents made in this period to t	ifer total of all loans re he Statement of Expen	eceived this period ditures (Form No.	to the Statement of Other 31-B). Transfer Outstanding	
1 Total prior amount \$O.OO	-				
² Total received this period \$					
³ Total payments this period \$ (To Form No. 31-B)					
⁴ Total Outstanding Balance \$ (To Form No. 30-A)					