

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Franklin County Republican Party - Campaign												
From Whom Received Citizens for Bill Schuck								Prior Amount 1,000.00		Amt. Incurred this Period		
Address 865 Macon Alley										Outstanding Balance 1,000.00		
City Columbus		State O/H		Zip Code 43206		Loans Received This Period			Payments This Period			
						Date			Date			
						Amount			Amount			
M		D		Y		\$			M		D	
0		2		1		0			0		0	
Registration Number, if PAC						M			D			
						Y						
Employer/Occupation/Labor Organization*						M			D			
						Y						
From Whom Received								Prior Amount		Amt. Incurred this Period		
Address										Outstanding Balance		
City		State		Zip Code		Loans Received This Period			Payments This Period			
						Date			Date			
						Amount			Amount			
M		D		Y		\$			M		D	
Registration Number, if PAC						M			D			
						Y						
Employer/Occupation/Labor Organization*						M			D			
						Y						
From Whom Received								Prior Amount		Amt. Incurred this Period		
Address										Outstanding Balance		
City		State		Zip Code		Loans Received This Period			Payments This Period			
						Date			Date			
						Amount			Amount			
M		D		Y		\$			M		D	
Registration Number, if PAC						M			D			
						Y						
Employer/Occupation/Labor Organization*						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 \$ 1,000.00
- 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 \$ 1,000.00 (To Form No. 30-A)