## Statement of Loans Received

Page	

				Prescrib	ed by Sec	retary of	State 3/05				
Full Name of Committee The Committee to Elect Ro	n Stake		entaturum tehte kirimin turu eine suutus.		:						
From Whom Received Ronald D. Stake Sr.	a San Albert a Shiring and American			1 1. 1.		ersoneinen rikilike		Prior An \$0.		a diagra	Amt. Incurred this Period \$1,500.00
<sup>Address</sup> 7660 Rodebaugh Rd.	5.53.2		a jednak K	we in	* ;	:	e vedera (filosoficio) est.	and the second			Outstanding Balance \$1,500.00
<sup>City</sup> Reynoldsburg	St ate OH	Zip Code 43068		L	Loan Date	s Receiv	ed This Period Amount		P Date	ayments	This Period Amount
Date Loan was originally Incurred	м 0 3	2 5	0 9	м 0 3	D 2 0	9	s \$1,500.00	М	D	Y	\$
Registration Number, if PAC		<b>.</b>	<u> </u>	М	D	Y		М	D	Y	
Employer/Occupation/Labor Organization	ı*			М	D	Y		М	D	Y	
From Whom Received								Prior An	iount		Amt. Incurred this Period
Address and the second	**************************************	**			·-,		Variable Services				Outstanding Balance
City Commence of the Commence	St ate OH	Zip Code		D	Loan	s Receiv	ed This Period Amount	342	F Date	ayments	This Period Amount
Date Loan was	M	D	Y	М	D	Y	\$	М	D	Y	\$
Registration Number, if PAC		to the s		М	D	Y	-	М	D	Y	
Employer/Occupation/Labor Organization	*			М	D	Y		М	D	Y	
From Whom Received	, trainfeathal ary an large leg congress (A) congress							Prior Am	ount		Amt. Incurred this Period
Address		, , , , , , , , , , , , , , , , , , , ,									Outstanding Balance
City	St ate OH	Zip Code		D	Loans	s Receiv	ed This Period		P Date	ayments	This Period
Date Loan was originally Incurred	M	D	Y	M	D	Y	\$	М	Date	Y	Amount
Registration Number, if PAC				М	D	Y		М	D	Y	
Employer/Occupation/Labor Organization*			М	D	Y		М	D	Y		
* Required for contributions from inc the individual's business, if any, rath labor organization of which the emp	er than en loyees are	nployer she members	ould be lis , if any, m	ted. If tv ust also :	vo or mo appear. [	re empl R.C. 35	oyees contribute via p 17.10(B)(4)]	ayroll ded	uction an	d exceed	the aggregate of \$100, the
If a loan is forgiven, write "Forgi	ven" in tl	ne "Outst	anding B	alance"	space.	Transf	er total of all loans	received	this peri	od to th	e 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 Outstanding Balance to the Cover page (Form No. 30-A).

Total prior amount \$\$0.	00	
<sup>2</sup> Total received this period \$	\$1,500.00	(To Form No. 31-A-2)
Total payments this period \$ _	\$0.00	(To Form No. 31-B)
Total Outstanding Balance \$	\$1,500.00	(To Form No. 30-A