3 Total Payments this Period \$

4 Total Outstanding Balance \$

Page	Witwinstandstyrainnel

Statement of Loans Received

				Pı	escribed l	y Secret	ary of	State3/05					
Full Name of Committee Friends of Randy Reis	lino							og til 20, samfati klassen millet en gregorie se mans fra kriges AMA platet et en gregorie.				acades de construir de la coloi de continue con circular de construir de continue con continue con de continue con financia de continue continue con financia de continue con financia de continue continue con financia de continue continue con financia de continue con financia de continue cont	
From Whom Received										nount	00.00	Amt. Incurred this Period	
Randy Reisling Address 3178 Ranke Ct										±,U	JU.UU	Outstanding Balance 4,000.00	
City	State	Zip Coo		Lo	ans Recei	ved Thi	s Perio			D	-	ents This Period	
Grove City Date Loan was originally	О Н м	4312 D	Y	M	Date D	Y	\$	Amount	M	Date	Y	Amount \$	
Incurred Registration Number, if PAC				M	D	Y			M	D	Y		
				M		Y	_		M	D	Y		
Employer/Occupation/Labor Organization*					D	1			101		1		
From Whom Received								Prior Amount Amt. Incurred this Period					
Address												Outstanding Balance	
City	State	Zip Co	ie .	Lo	ans Recei Date	ved Thi	s Perio	d Amount	Payments This Period Date Amount				
Date Loan was originally	М	D	Y	М	D	Y	\$	and the state of t	М	D	Y	\$	
Incurred Registration Number, if PAC			<u> </u>	M	D	Y			M	D	Y		
		1											
Employer/Occupation/Labor Organization*				М	D	Y			М	D	Y		
From Whom Received								oon oo laada kaa kaa kaa kaa kaa kaa kaa kaa kaa	Prior An	nount		Amt. Incurred this Period	
Address	*CMCPUTECETH HORSEMAN					na ni propositi (na ni katelori)	anipologia paramini an a pa	Albania de America de Caracteria de Caracteria de Caracteria de Caracteria de Caracteria de Caracteria de Cara		-14	123	Outstanding Balance	
City	State	Zip Co	de	Lo	Loans Received This Period Date Amount					Payments This Period			
Date Loan was originally Incurred	М	D	Y	М	D	Y	\$		М	D	Y	\$	
Registration Number, if PAC			····	М	D	Y		yyyd y chafun y chafu y gwyr y gan y chafu y c	М	D	Y		
Employer/Occupation/Labor Organization*	***************************************		namen van een een een een een een een een een e	М	D	Y		amanan amana	M	D	Y		
* Required for contributions over \$100 to st if any, rather than employer should be listed the employees are members, if any, must ap If a loan is forgiven, write "Forgiven" in the Transfer total of all payments made in this p	I. If two copear. R.Copear. R.Copear	c. 3517.1 ding Bal	nployees d 0(B)(4) ance" spacement of Ex	lonate via ce. Transfe penditure:	payroll de	duction :	and exc	eed the aggregate of \$1 d this period to the State	00, the lab	or organiz Other Incor	ation of w	hich No. 31-A-2).	
1 Total prior amount \$		4,1	00.00	union .									
2 Total received this period \$				0.00	(To Fo	rm No. 3	1-A-2)						

0.00 (also record on Form 31-B)

4,000.00 (To Form No. 30-A)