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## Statement of Loans Received

Prescribed by Secretary of State 2/01

Full Name of Committee								<u> </u>			
Committee to Re-elect	Don Sc	honhardt									
From Whom Received	Dongoe	TIOTH INTER						Prior Amo	ant .		Amt, Incurred this Period
Donald J. Schonhardt						2,000.00					
Address				_							Outstanding Balance
3750 Cemetery Rd.											
City	State Zip	Code	Loan	ns Receive	d This Per	riod				Payn	nents This Period
Hilliard	O(H 4)	3026	ļ	Date		_	Amount		Date		Amount
Date Loan was originally ( ; ; ; '		9 0 1	M	Di	Y:	\$		М	D:	Y	\$
Registration Number, if PAC		-	M	D :	Y			M	D	Y	
Employer/Occupation/Labor Organization*			М	D:	Y			М	Đ.	Ψ.	
From Whom Received	:		<u> </u>			_		Prior Am			Amt. Incurred this Period
Donald J. Schonhardt									1	00.00	
Address											Outstanding Balance
3750 Cemetery Rd.											100.00
City	1 7	Code	Loa	ns Receive	d This Pe	nod					ments This Period
111111111111111111111111111111111111111	O: <u>H</u>  4:			Date			Amount		Dat		Amount
Date Loan was originally Incurred		D Y D 2 0 1	М	D	Y	Ş		М	D	Y .	
Registration Number, if PAC	· · ·		М	D,	Ÿ			м.	D	Y	
Employer/Occupation/Labor Organization*			М	D	Y			М	D:	Y	
From Whom Received								Prior Am	count		Amt, Incurred this Period
Address											Outstanding Balance
City	State Z	p Code	Loans Received This Period Date Amount				Payments This Period  Date Amount				
Date Loan was originally Incurred	М	D Y	М	Ď	Y	\$	<del></del>	М	D	Y	\$
Registration Number, if PAC	<u> </u>		M.	D	Y			. M:	D	Y	
Employer/Occupation/Labor Organization*			М	D.	Y			М:	D :	Y:	
										<u> </u>	

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).

1	Total prior amount \$	2,100.00	
2	Total received this period \$	0.00	(To Form No. 31-A-2)
3	Total Payments this Period \$	0.00	(also record on Form 31-B
4	Total Outstanding Balance \$	2,100.00	(To Form No. 30-A)