4 Total Outstanding Balance \$

Page 1
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## **Statement of Loans Received**

Prescribed by Secretary of State3/0

		ricscii	ocu i	by Bec	лска	ty Ot Bia	W3/03							
Full Name of Committee		:												
Committee to Keep Judge Squire														
From Whom Received								Prior Amount					Amt. Incurred this Period	
Percy Squire									3:	1,5	00.	00		
Address													Outstanding Balance	
547 Mohawk Street													31,500.00	
City State Zip Code	I	oans R	Period		Payments This Period									
Columbus O H 43206	Date Amount							Date					Amount	
Date Loan was originally M D Y	M	E		Y		\$		М	D		Y	7	\$	
incurred - 1 0 2 2 0 0				1		1			1					
Registration Number, if PAC	М	I	$\vdash$	Y				M	D		Y	<u>. 1                                   </u>		
		-				1								
Employer/Occupation/Labor Organization*	М	T	,	Y	-	1	<del></del>	М	D	_	Ý	<u>,                                    </u>		
						1								
From Whom Received	<u> </u>		J			<del>!</del>		Prior A	nount	٠.	Ь	بسط	Amt. Incurred this Period	
Percy Squire (The Columbus Dispatch	-Nlor	ATCTA	m	or A	d	vartio	eina)			1 A'	74.	24		
Address	-1 VC V	wape	ape	-1 L''	LU.	ver us	ыцу,	-		r, U	7.	74	Outstanding Balance	
547 Mohawk Street													4,074.24	
City State Zip Code	т-						<del></del>	_						
	1 -	Loans Received This Period  Date Amount							Payments This Period					
Columbus O H 43206  Date Loan was essentially M D Y	1			T 77		10	Amount	3.0	T 5	Date	; T = 0	-	Amount	
	М	D	1	Y		l <sup>3</sup>		М	D		ľ		\$	
				٠.,	<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·		١.	<u> </u>	<u> </u>	<u>_</u>		
Registration Number, if PAC	М	D	7	Y				М	D	1	Y	1	1	
<u>,, , , , , , , , , , , , , , , , , , ,</u>	lacksquare		ļ.,	<u> </u>	_	<u> </u>			┸	_	<u> </u>	<u> </u>		
Employer/Occupation/Labor Organization*	М	E	9	Y	1			M	D	1	Y	1	i e	
	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$					<u> </u>					L.		<u>L</u>	
From Whom Received	_							Prior A					Amt. Incurred this Period	
Percy Squire (WVKO AM 1580 Franklin Comr	<u>nunic</u>	ation	s, I	nc]	Rac	<u>dio Ac</u>	dvertising)			<u> 1,99</u>	<u>98.(</u>	<u> </u>		
Address													Outstanding Balance	
547 Mohawk Street													1,998.00	
City State Zip Code	L	Loans Received This Period									F	'aym	ents This Period	
Columbus O H 43206		Date Amount						Date					Amount	
The concentration of the Management of the Manag	M	D		Y		\$		M	D		Y		\$	
high rest 1 1 0 2 0 0						ł			1			1 1		
Registration Number, if PAC	М	D	-	Y	_			М	D		Y	1		
•	i i			H		l			i					
Employer/Occupation/Labor Organization*	М	D		Y		<b>!</b>	······································	М	T D	<del>                                     </del>	Y	1	· · · · · · · · · · · · · · · · · · ·	
						ı					-	1		
						<u>.                                    </u>			٠		L	لسبيا		
* Required for contributions over \$100 to statewide and general assembly		T	41		1	ـــــــــــــــــــــــــــــــــــــ		ď	C41	ن ناد.	<b>J</b> T/			
													iess,	
if any, rather than employer should be listed. If two ormore employees don	ate via p	ayron c	ieauc	nion a	na e	xceea un	e aggregate of \$100	une labor o	nganız	ation	OIW	nıçn		
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.	ransfer	total of	all lo	oans r	ecei	ved this p	period to the Statem	ent of Othe	r Inco	ne (I	orm	No. 3	31-A-2).	
Transfer total of all payments made in this period to the Statement of Expe	nditures	(Form	No.	31-B)	. Tra	ınsfer To	tal Outstanding Bala	ince to the	cover j	oage	(For	n No.	. 30-A).	
1 Total prior amount \$ 37,572.24														
2 Total received this period \$	0.00	<u>)</u> (To	For	n No.	31-2	A-2)								
-		<del>-</del> `				•								
3 Total Payments this Period \$	0.00	) (als	о гес	ord or	ı Foi	rm 31-B)	)							

37,572.24 (To Form No. 30-A)