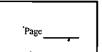
4 Total Outstanding Balance \$

## FOR PAPER FILING ONLY



## **Statement of Loans Received**

Prescribed by Secretary of State3/05

Full Name of Committee											<u></u> :		
Friends of Marilyn Brown													
From Whom Received						Prio	r Am	ount		1	Amt. Incurred this Period		
Evan M Brown							2,000.00				0.		
Address									00.0		Outstanding Balance		
33985 Blue Heron Dr						1 .				1,-	2,000.		
City State Zip Code	1.	Loans Received This Period						Payments This Period					
Solon O H 44139		Date Amount					Date Amount						
Date Loan was originally M D Y Incurred 0 7 1 0 0 6	6 M	D		Y	s	М	_	D	Y	\$			
Registration Number, if PAC	М	D		Y		М		D	Y				
Employer/Occupation/Labor Organization*	M	D	+	Y		М		D	Y	1			
From Whom Received				•	<u> </u>	Prio	r Am	ount	<u> </u>	I	Amt. Incurred this Period		
Evan M Brown					•			5,0	0.00	00	0.		
Address							¢.			,	Outstanding Balance		
33985 Blu Heron Dr											0.0		
City State Zip Code	Louis received 1113 Certon						Payments This Period						
Solon O H 44139		Date	<del>-</del>		Amount			Dat	e		Amount		
Date Loan was originally M D Y	M	D	'	Y	\$	М		D	Y	~ s	; 		
Incurred 1 0 0 4 0 6	· · · · ·	D	+	<u> </u> Yl		0 	4	0 5 Di	1	2	50		
Registration Number, if PAC	M	1 1		1		IVI	j	٦	ľ				
Employer/Occupation/Labor Organization*	М	D	,	Y	:	М		D	Y				
From Whom Received				1		Ртіо	r Am	ount	<u> </u>	Ē	Amt. Incurred this Period		
Greg H Brown							1,000.00						
Address					•		ś	. ,		_	Outstanding Balance		
3901 Superior Ave											1,000.		
City State Zip Code	Loans Received This Period						Payments This Period						
Cleveland O H 44114		Date	:		Amount			Dat	e		Атоилт		
Date Loan was originally M D Y Incurred 0 8 1 7 0 6	M	D	,	Y	\$	М		D	Y	S			
Registration Number, if PAC	M	D	+-,	Y	·	М		D	Y	1	· · · · · · · · · · · · · · · · · · ·		
				<u> </u>						4			
Employer/Occupation/Labor Organization*	M	D	'	Y		М		Di	Y				
* Required for contributions over \$100 to statewide and general assentif any, rather than employer should be listed. If two ormore employees 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" sp Transfer total of all payments made in this period to the Statement of I													
1 Total prior amount \$ 8,000.00	<u>)</u>				:								
2 Total received this period \$	0.0	<u>0</u> (То F	orm Ne	o. 31-	A-2)								
3 Total Payments this Period \$ 5,	000.0	0_ (also 1	record	on Fo	orm 31-B)								

3,000.00 (To Form No. 30-A)