Page_	

Statement of Loans Made

Prescribed by Secreta	ry of Sta	ate 2/	01							
Full Name of Committee	·-									
Kilroy for Commissioner										
To Whom Made							unt		Amt. Loaned this Period	
Brooks for Commissioner						1	14,97	0.45	Ì	
Address									Outstandin	g Balance
3886 N. High Street										0.00
City	State Zip Code						Payn	nents Re	ceived This Period	
Columbus	OF	I	432	214	1		Date		Amount	
Date Loan was originally Made	9		D	Y	М		D	Y	\$ Media	
The state of the s	1 0) 2	7	0 4	0	1	0 5	0 6	ŀ	500.00
					M	T	D	Y		
					$ \mathbf{o} $	3 2	2 2	0 6		14,470.45
					M		D	Y		
						_ .				
To Whom Made					Prior .	Amo	unt		Amt. Loane	d this Period
Address									Outstanding	g Balance
City	State	Zip	Code	3			Paym	ents Re	ceived This	Period
							Date			Amount
Date Loan was originally Made	M		D	Y	M	Т	D	Y	\$	
(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)										
					M		D	Y		
]	
					M		D	Y		
To Whom Made					Prior A	Amoı	unt		Amt. Loane	d this Period
Address									Outstanding	Balance
City	State	Zip	Code		Payments Received This Period					Period
		<u> </u>					Date	_		Amount
Date Loan was originally Made	M		D	Y	M		D	Y	\$	
					M		D	Y	1	
					M		D	Y		
T()										
If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all to	ans mad	e this	perio	d to the	Statem	ent o	f Exper	nditures	(Form No. 31	I-B).
Transfer total of all payments received in this period to the Statement of Other Income (Form No). 31-A-Z	j. It	anster	I otal C	Jutstand	ing I	Balance	to the c	over page.	

Total Loans this Period \$	(also record on Form 31-B)							
Total Outstanding Balance \$	0.00 (also record on cover page)							
Fotal Payments Received this Period \$	14,970.45 (also recorded on Forms 31-A-2)							