

# Statement of Loans Received

Prescribed by Secretary of State 3/05

|   |  |                    |   |                          |   |   |   |                                     |   |   |   |    |   |         |  |  |  |  |
|---|--|--------------------|---|--------------------------|---|---|---|-------------------------------------|---|---|---|----|---|---------|--|--|--|--|
| Full Name of Committee<br><b>Friends of Marilyn Brown</b> |  |                    |   |                          |   |   |   |                                     |   |   |   |    |   |         |  |  |  |  |
| From Whom Received<br><b>Evan M. Brown</b>                |  |                    |   |                          |   |   |   | Prior Amount<br><b>0.00</b>         |   | Amt. Incurred this Period<br><b>20,000.00</b> |   |    |   |         |  |  |  |  |
| Address<br><b>33985 Blue Heron Drive</b>                  |  |                    |   |                          |   |   |   |                                     |   | Outstanding Balance<br><b>20,000.00</b>       |   |    |   |         |  |  |  |  |
| City<br><b>Solon</b>                                      |  | State<br><b>OH</b> |   | Zip Code<br><b>44139</b> |   | Loans Received This Period<br>Date Amount |   | Payments This Period<br>Date Amount |   |   |   |    |   |         |  |  |  |  |
| Date Loan was originally Incurred                         |  | M                  | D | Y                        | M | D   | Y | \$                                  | M | D   | Y | \$ |   |         |  |  |  |  |
|   |  | 1                  | 0 | 0                        | 4 | 0   | 6 | 1                                   | 0 | 0   | 4 | 0  | 6 | 20000.  |  |  |  |  |
| Registration Number, if PAC                               |  |                    |   |                          |   |   |   | M                                   | D | Y   | M | D  | Y |         |  |  |  |  |
| Employer/Occupation/Labor Organization*                   |  |                    |   |                          |   |   |   | M                                   | D | Y   | M | D  | Y |         |  |  |  |  |
| From Whom Received<br><b>Nita L. Brown</b>                |  |                    |   |                          |   |   |   | Prior Amount<br><b>0.00</b>         |   | Amt. Incurred this Period<br><b>5,000.00</b>  |   |    |   |         |  |  |  |  |
| Address<br><b>26600 George Zeiger Dr. # 405</b>           |  |                    |   |                          |   |   |   |                                     |   | Outstanding Balance<br><b>5,000.00</b>        |   |    |   |         |  |  |  |  |
| City<br><b>Beachwood</b>                                  |  | State<br><b>OH</b> |   | Zip Code<br><b>44122</b> |   | Loans Received This Period<br>Date Amount |   | Payments This Period<br>Date Amount |   |   |   |    |   |         |  |  |  |  |
| Date Loan was originally Incurred                         |  | M                  | D | Y                        | M | D   | Y | \$                                  | M | D   | Y | \$ |   |         |  |  |  |  |
|   |  | 0                  | 6 | 2                        | 1 | 0   | 6 | 0                                   | 6 | 2   | 1 | 0  | 6 | 5000.00 |  |  |  |  |
| Registration Number, if PAC                               |  |                    |   |                          |   |   |   | M                                   | D | Y   | M | D  | Y |         |  |  |  |  |
| Employer/Occupation/Labor Organization*                   |  |                    |   |                          |   |   |   | M                                   | D | Y   | M | D  | Y |         |  |  |  |  |
| From Whom Received<br><b>Michelle Brown</b>               |  |                    |   |                          |   |   |   | Prior Amount<br><b>0.00</b>         |   | Amt. Incurred this Period<br><b>2,000.00</b>  |   |    |   |         |  |  |  |  |
| Address<br><b>33985 Blue Heron Dr.</b>                    |  |                    |   |                          |   |   |   |                                     |   | Outstanding Balance<br><b>2,000.00</b>        |   |    |   |         |  |  |  |  |
| City<br><b>Solon</b>                                      |  | State<br><b>OH</b> |   | Zip Code<br><b>44139</b> |   | Loans Received This Period<br>Date Amount |   | Payments This Period<br>Date Amount |   |   |   |    |   |         |  |  |  |  |
| Date Loan was originally Incurred                         |  | M                  | D | Y                        | M | D   | Y | \$                                  | M | D   | Y | \$ |   |         |  |  |  |  |
|   |  | 0                  | 7 | 1                        | 0 | 0   | 6 | 0                                   | 7 | 1   | 0 | 0  | 6 | 2000.00 |  |  |  |  |
| Registration Number, if PAC                               |  |                    |   |                          |   |   |   | M                                   | D | Y   | M | D  | Y |         |  |  |  |  |
| Employer/Occupation/Labor Organization*                   |  |                    |   |                          |   |   |   | M                                   | D | Y   | M | D  | Y |         |  |  |  |  |

\* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees donate via payroll deduction and exceed the aggregate of \$100, the labor organization of which 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. 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).

- Total prior amount \$ 0.00
- Total received this period \$ 27,000.00 (To Form No. 31-A-2)
- Total Payments this Period \$ 0.00 (also record on Form 31-B)
- Total Outstanding Balance \$ 27,000.00 (To Form No. 30-A)