



## **Statement of Loans Received**

Form 31-0

R.C. 3517.10

Full Name of Commi	ittee			* **	· · · · · · · · · · · · · · · · · · ·	
Citizens for Chris Lon		·				
From Whom Received					Prior Amount	Amt. Incurred this Period
Christopher Long					13417.15	0.00
Street Address						Outstanding Balance
1675 Haft Drive						
City	State	Zip Code			· · · · · · · · · · · · · · · · · · ·	13417/ (CEA
Reynoldsburg	ОН	43068	Loans Received T	his Period	Paymen	ts This Period
Date Loan was Originally Incurred (MM/DD/YYYY)			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY) Amount	
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/	DD/YYYY) Amount
Employer/Occupation/Labor	r Organization*			·		
			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/	DD/YYYY) Amount
From Whom Received					Prior Amount	Amt. Incurred this Period
						The modified the Ferror
Street Address						Outstanding Balance
	<u> </u>					Oddanding Balance
City	State OH	Zip Code	Loans Received T	his Period	Payment	ts This Period
Date Loan was Originally Incurred (MM/DD/YYYY)			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/t	OD/YYYY) Amount
Registration Number, if PAC						
Togotalor Hamber, il FAO			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/I	OD/YYYY) Amount
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/D	DD/YYYY) Amount
	· · · · · · · · · · · · · · · · · · ·					
aggregate of \$100, the labor f a loan is forgiven, write "Fo	organization of orgiven" in the "C	which the employed	wide and general assembly cand should be listed. If two or more e ees are members, if any, must al ce" space. Transfer total of all loa period to the Statement of Exper	so appear. [R.C.	. 3517.10(B)(4)]	on and exceed the
Total Prior Amount \$ <u>1</u>	3417.15					
Total Received This Pe	eriod \$ <u>0.00</u>		(also reco	ord on Form 31-	<del>\</del> -2)	
Total Payments Receiv	ed this Perio	d \$ <u>0.00</u>	(also reco	rd on Form 31-B	) )	
Total Outstanding Bala	nce \$ <u>13417</u> .	15	(also reco	rd on Form 30-A	)	