

# Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Citizens for Dorrian Committee</b>												
From Whom Received <b>Hugh J. Dorrian, Candidate</b>								Prior Amount -		Amt. Incurred this Period 3,000.00		
Address <b>999 Birchmont Rd.</b>										Outstanding Balance		
City <b>Columbus</b>		State <b>O</b>	Zip Code <b>H 43220</b>	Loans Received This Period Date <b>0 3 1 8 1 3</b>				Payments This Period Date <b>0 4 1 7 1 3</b>				
Date Loan was originally Incurred		M <b>0</b>	D <b>3</b>	Y <b>1</b>	M <b>0</b>	D <b>3</b>	Y <b>1</b>	\$ <b>3,000.00</b>	M <b>0</b>	D <b>4</b>	Y <b>1</b>	\$ <b>3000.00</b>
Registration Number, if PAC <b>N/A</b>								M D Y		M D Y		
Employer/Occupation/Labor Organization* <b>City Auditor- City of Columbus</b>								M D Y		M D Y		
From Whom Received								Prior Amount		Amt. Incurred this Period		
Address										Outstanding Balance		
City		State	Zip Code	Loans Received This Period Date				Payments This Period Date				
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC								M D Y		M D Y		
Employer/Occupation/Labor Organization*								M D Y		M D Y		
From Whom Received								Prior Amount		Amt. Incurred this Period		
Address										Outstanding Balance		
City		State	Zip Code	Loans Received This Period Date				Payments This Period Date				
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC								M D Y		M D Y		
Employer/Occupation/Labor Organization*								M D Y		M D Y		
From Whom Received								Prior Amount		Amt. Incurred this Period		
Address										Outstanding Balance		
City		State	Zip Code	Loans Received This Period Date				Payments This Period Date				
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
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 \$ 3,000.00 (To Form No. 31-A-2)
- Total Payments this Period \$ 3,000.00 (also record on Form 31-B)
- Total Outstanding Balance \$ 0.00 (To Form No. 30-A)