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Statement of Loans Received

				Pr	escribed b	y Secreta	ary of Sta	ite3/05					
Full Name of Committee													
Friends of Zach Scott													
From Whom Received									Prior A	mount		Amt. Incurred this Period	
Zachary Scott								0.00			15,000.00		
Address											0,00	Outstanding Balance	
7784 Rowles Dr												15,000.00	
City State Zip Code Loans Received This Period							Payments This Period						
Columbus	OIF	<u>1 4323</u>	5		Date Amount					Da	te	Amount	
Date Loan was originally Incurred	м 1 ($0 \mid 0 \mid 1$	$\begin{vmatrix} \mathbf{Y} \\ 1 & 5 \end{vmatrix}$	М 1 0	0 1	Y 1 5	Ş	15,000.00	М	D 	Y	0.00	
Registration Number, if PAC				М	D	Y			М	D	Y		
Employer/Occupation/Labor Organization*				М	D	Y	1		M	D	Y		
Franklin County Sherif	f Off	ice, Sh	eriff						j	!	+		
From Whom Received					···		-		Prior A	mount	•	Amt. Incurred this Period	
Charles R. Lang, Jr											0.00	15,000.00	
Address												Outstanding Balance	
1751 Hiner Rd												15,000.00	
City	State			Lo	ns Recei	ved This	Period		Payments This Period				
<u>Orient</u>	OIF	<u> 1 4314</u>	6		Date			Amount	Date Amount				
Date Loan was originally lincurred	м 1 С	$\begin{vmatrix} D \\ 0 \end{vmatrix} 1$	1 5	$\begin{bmatrix} M \\ 1 \end{bmatrix} 0$	0 0 1	$\begin{vmatrix} \mathbf{Y} \\ 1 \end{vmatrix} 5$	s	15,000.00	M	D	Y	s 0.000	
Registration Number, if PAC				М	D	Y		·	М	D	Y		
Employer/Occupation/Labor Organization*				М	D	Y	1		M	D	Y	1	
FOG Recycling, Owner													
From Whom Received								Prior Amount Amt. Incurred this Period			Amt. Incurred this Period		
Address												Outstanding Balance	
												:	
City	State	Zip Cod	le	Los	ns Recei	ved This	Period				Paym	ents This Period	
L					Date			Amount		Da	te	Amount	
Date Loan was originally	М	D	Y	М	D	Y	S		М	D	Y	\$	
Incurred					 	<u> </u>	-		lacksquare		<u> </u>		
Registration Number, if PAC				М	D	Y 			М	D	Y 		
Employer/Occupation/Labor Organization*				М	D	Y			М	D	Y		
									Ì	1		<u>l </u>	
* Required for contributions over \$100 to st if any, rather than employer should be listed the employees are members, if any, must ap	l. If two	onnore em	ployees do										

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 (For	ın No. 3	1-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 (Fo	rm No. 3	30-A)

1	Total prior amount \$	0.00_	
2	Total received this period \$	30,000.00 (To Form No. 31-A-2)	
3	Total Payments this Period \$	0.00 (also record on Form 3)	1-B
4	Total Outstanding Balance \$	30,000.00 (To Form No. 30-A)	