

Statement of Loans Received

Prescribed by Secretary of State 2/01

Full Name of Committee Glaeden for Judge																	
From Whom Received Carrie E. Glaeden										Prior Amount \$4,000.00		Amt. Incurred this Period 0.00					
Address 5142 Highland Meadows Drive												Outstanding Balance \$4,000.00					
City Hilliard		State OH		Zip Code 43026		Loans Received This Period Date Amount						Payments This Period Date Amount					
Date Loan was originally incurred		M	D	Y	M	D	Y	\$	0.00		M	D	Y	\$	0.00		
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 Amount						Payments This Period Date Amount					
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 Amount						Payments This Period Date Amount					
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	

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 Outstanding Balance to the Cover page (Form No. 30-A).

¹ Total prior amount \$ 4,000.00

² Total received this period \$ 0.00 (To Form No. 31-A-2)

³ Total payments this period \$ 0.00 (To Form No. 31-B)

⁴ Total Outstanding Balance \$ 4,000.00 (To Form No. 30-A)