Page _	1	

Statement of Loans Received

Prescribed by Secretary of State 2/01

<u> </u>														
Full Name of Committee	C													
Citizens for Dorrian	Com	nittee							n.:		4	 -	I A I	data in Desired
From Whom Received					Prior Amount				Amt. Incurred this Period					
Hugh J. Dorrian, candidate											3,000.00			
Address							Outstanding Balance					-		
999 Birchmont Rd.									0.00					
City		Zip Code		Loans Received This Period			1				ents This Period			
Columbus		43220		Date Amount		Date				Amount				
Date Lear reconfiguelly	M	D Y		1 1	. D	Y	2	2000.00	M		D	Y	s	2000.00
जिल्लामंदर्द्द्र -	1 1	2 9 0			2 9	0 4		3000.00		2	0 3	0 5	ļ	3000.00
Registration Number, if PAC			M		D	Y			М		D 	Y		
Employer/Occupation/Labor Organization	*		M	1	D	Y	<u> </u>		М		D	Y		
City Auditor- City of C	Colum	ıbus	- 1											•
From Whom Received							-		Prior	Am	ount		Amt. Inc.	rred this Period
•									1					
Address					-	•							Qutstandi	ng Balance
Cit.	State	Zip Code			- n ·	1.701	n : 1		Payments This Period					
City	State	Zip Code		Loans Received This Period				Date				Amount		
2.611	М	DY		, T	Date	Y	16	Amount	M		D	Y	Is	Amount
Dete koen was originally Trentosi	М	D Y	M		J	Y	1		M				,	
Registration Number, if PAC			N	1	D	Y			М		D	Y		
			1				ŀ		l			Li		
Employer/Occupation/Labor Organization	*		N	4	D	Y	1		М		D	Y	†	
			1			1 1								
From Whom Received					Prior Amount Amt. Incurred this Period									
1									1					
Address													Outstand	ng Balance
													Ī	
City State Zip Code Loans Received This Period						Payments This Period Date Amount								
Date Amount														
Data Laen wee อาร์สภรปัฐ	М	D Y	· M	4	D	Y	S	······································	М		D	Y	s	
रेशालकालाई														
Registration Number, if PAC	u		N	4	D	Y	1		М		D	Y	1	- W
					1		1					.		
Employer/Occupation/Labor Organization	*		N	4	D	Y	1		М		D	Y	1	
					1		1					1	1	
		 			<u>-</u>							 		

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).

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