

**RECEIVED**

By OGC/CELA at 9:47 am, May 23, 2024

**JOHN E. CHAPMAN**

Attorney at Law

[REDACTED]  
Cuyahoga Falls, Ohio 44223[REDACTED]  
May 20, 2024

Federal Elections Commission  
Office of Complaints Examination  
& Legal Administration  
Attn Wanda Brown, Assistant General Counsel  
1050 First Street, NE  
Washington, DC 20463

RE: *THE REPUBLICANS OF NORTHEAST OHIO*

MUR 8224

To Whom it May Concern:

I am writing as the attorney for The Republicans of Northeast Ohio Political Action Committee (PAC) and Mr. Edward Davidian. Attorney Corinne Hoover filed a complaint to the Federal Elections Commission alleging that the PAC has violated sections of the Federal Elections Campaigns Act. It is important to note that in December Attorney Hoover previously targeted Mr. Davidian by making false allegations of violations of Ohio Law. Those allegations were reviewed by the Summit County Board of Elections in January of 2024 and found to be without merit. The letter sent to Mr. Davidian from the Commission was dated March 7, 2024; however, he did not receive it until May 9 with the envelope it was mailed in dated May 8, 2024. Mr. Davidian promptly contacted counsel and respectfully requests that you accept this response.

First, the PAC did send out a mass mailing to several thousand registered voters prior to the Ohio Primary. The mailing consisted of a candidate slate card that included the names of 24 candidates of whom three were candidates for Federal Office. Those three were Donald Trump for President, Frank LaRose for Senate, and Chris Banweg, for the House of Representatives. The candidate names were printed solely on one side of the card and the other side contained the name of the PAC, a general admonishment to vote, decorative coloring, and standard mail information such as the address of the recipient and the name of the PAC. Less than 1/3 of the total space of the candidate side of the card was devoted to the Federal three races.

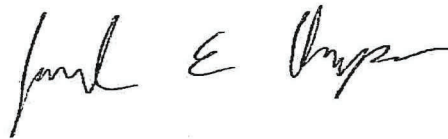
There are two complaints at issue here. First, that Mr. Davidian did not register the PAC as a Federal Political Action Committee. Please note that Mr. Davidian and his PAC are registered with the State of Ohio and that he has filed all required expenditure forms. Mr. Davidian believes that the PAC's slate card does not exceed the threshold required to mandate that he register as a Federal PAC.

The documentation enclosed includes an Ohio Campaign Finance Report submitted by the PAC dated March 7, 2024. The report includes an expenditure of \$4,704.16 to the United States Postal Service for the postage and mailing of the slate card. The second document is a receipt for the printing of the slate card using Vista Print in the amount of \$2,627.64. The total expenditure according to Mr. Davidian and the PAC in this filing was \$7,328.80. Since the total space used to support the Federal candidates was approximately twelve percent, Mr. Davidian believes that he did not exceed the \$1,000.00 contribution threshold.

The second complaint was that the PAC did not include the required disclaimer on the mailer. The slate card clearly identifies the name of the PAC and has the disclaimer mandated by Ohio law, but it does not contain the language required by Federal law. As previously stated, Mr. Davidian believes that this expenditure did not trigger the reporting requirements and did not require anything other than the standard disclaimer and reporting contained in Ohio Law.

Should the Commission disagree with Mr. Davidian and the PAC and find him in violation of either or both Federal requirements, Mr. Davidian accepts their conclusions and will make every effort to correct his future conduct. On the advice of counsel Mr. Davidian will register his PAC so that, should he wish to continue in his advocacy in Federal Elections, he will be able to do so. Mr. Davidian has principally confined his political activities to local elections as a volunteer in many local campaigns helping put up signs and knock on doors. Only in recent years has he ventured into creating a Political Action Committee to support local candidates and did not see the harm in including three names of Federal candidates alongside twenty-one others. Aside from Attorney Hoover's prior false allegations at the local level, Mr. Davidian has no prior misconduct and will be diligent and with the advice of counsel (if needed) make sure that he conforms to Federal rules. Mr. Davidian and the PAC diligently reported their expenditures as required by Ohio law and there was no intent to deceive or conceal their activity. Mr. Davidian respectfully asks that the Commission consider this should they find him in violation.

Sincerely,



John E. Chapman, 0075653  
Attorney at Law

[REDACTED]  
Cuyahoga Falls, Ohio 44223  
[REDACTED]





FEDERAL ELECTION COMMISSION  
1050 First Street, NE  
Washington, DC

# STATEMENT OF DESIGNATION OF COUNSEL

Provide one form for each Respondent/Witness

E-MAIL: [cela@fec.gov](mailto:cela@fec.gov)

AR/MUR/RR/P-MUR# 8224

Name of Counsel: John Chapman

Firm: John E. Chapman Attorney at Law

Address: [REDACTED]

Cuyahoga Falls, Ohio 44223

Office#: \_\_\_\_\_ Fax#: \_\_\_\_\_

Mobile#: 330-730-7626

E-mail: chapmalaw@gmail.com

The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

6-22-24 [Signature] Treas  
Date (Signature - Respondent/Agent/Treasurer) Title

EDWARD DAVIDIAN  
(Name - Please Print)

**RESPONDENT:** THE REPUBLICANS OF NORTHEAST OHIO  
(Please print Committee Name/ Company Name/Individual Named in Notification Letter)

Mailing Address: 1168 INVERNESS LANE  
(Please Print)

SPWO OH 44224

Home#: 330 620 5668 Mobile#: \_\_\_\_\_

Office#: \_\_\_\_\_ Fax#: \_\_\_\_\_

E-mail: \_\_\_\_\_

This form relates to a Federal Election Commission matter that is subject to the confidentiality provisions of 52 U.S.C. § 30109(a)(12)(A). This section prohibits making public any notification or investigation conducted by the Federal Election Commission without the express written consent of the person under investigation.

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**Your order is confirmed**

VistaPrint <no-reply@t.vistaprint.com>

Wed 1/31/2024 9:49 AM

To: Susan Truby <sltruby@msn.com>

Order Confirmation



# Thanks for your order, Susan.

We're processing it now and we will let you know when it's on its way.

Expected delivery: **Monday, February 12, 2024**

[Check order status](#)

## Order details

**Order number**

VP\_09MFL0FM

**Order date**

Wednesday, January 31, 2024

**Speed**

Standard

**Shipping address**


Edward Davidian  
1168 Inverness Lane  
Stow, OH 44224-2277  
United States

**Billing address**

Edward Davidian  
1168 Inverness Lane  
Stow, OH 44224-2277  
United States



## Order summary

	<b>Postcards</b>	<b>\$2,461.49</b>
	Quantity: 20000	
	Expected delivery: Mon, February 12	
<b>Subtotal:</b>		<b>\$2,461.49</b>
<b>Shipping:</b>		<b>\$0.00</b>
<b>Tax:</b>		<b>\$166.15</b>
<b>Total:</b>		<b>\$2,627.64</b>



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SUMMIT COUNTY  
BOARD OF ELECTIONS  
AKRON, OH 44311

## Ohio Campaign Finance Report

Form 30-A

ORC 3517.10

2024 MAR -7 PM 2:43

Committee Name <i>The Republican of Northeast Ohio</i>		Office Sought <i>N/A</i>		District
Street Address <i>1108 INVERNESS LANE</i>		City <i>STOW</i>	State <i>OH</i>	Zip <i>44224</i>
Candidate Name OR PAC Registration Number		Treasurer Name <i>EDWARD DAVIDIAN</i>		Election Date (MM/DD/YYYY) <i>03/19/2024</i>
Type of Report (choose one): <input type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input checked="" type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input type="checkbox"/> Pre-General <input type="checkbox"/> Post-General Statewide Candidates Only: <input type="checkbox"/> July Monthly <input type="checkbox"/> August Monthly <input type="checkbox"/> September Monthly				
Amended Report <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Termination <input type="checkbox"/> Check this box if the committee wishes to terminate with this report		Short Form Report (R.C. 3517.10(H)) <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.

1. Amount brought forward from last report	<i>-0-</i>
2. Total monetary contributions (From Forms 31-A and 31-E)	<i>5235.<sup>00</sup></i>
3. Total other income (From Form 31-A-2)	<i>3833.91</i>
4. Total funds available (sum of lines 1, 2, 3)	<i>9068.91</i>
5. Total monetary expenditures (From Forms 31-B and 31-F)	<i>8348.23</i>
6. Balance on hand (line 4 minus line 5)	<i>720.68</i>
7. Value of in-kind contributions received (From Form 31-J-1)	<i>-0-</i>
8. Value of in-kind contributions made (From Form 31-J-2)	<i>-0-</i>
9. Outstanding loans owed by committee (From Form 31-C)	<i>3000.<sup>00</sup></i>
10. Outstanding debts owed by committee (From Form 31-N)	<i>-</i>
11. Outstanding loans owed to committee (From Form 31-K)	<i>-</i>
12. Value of independent expenditures made (From Form 31-U)	<i>-</i>

THIS STATEMENT IS MADE UNDER PENALTY OF ELECTION FALSIFICATION.  
WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

*Edward Davidian*

Signature of Treasurer or Deputy Treasurer

*03/07/2024*

Date (MM/DD/YYYY)

Contribution Pages

*3*

Expenditure Pages

*1*

Other Pages

*4*

Total Pages

Last Updated 09/2017



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## Designation of Treasurer

Form 30-D

R.C. 3517.10

TYPE OF FILING: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> UPDATE			
COMMITTEE TYPE: <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> PCE <input type="checkbox"/> Political Party <input type="checkbox"/> Legislative Campaign Fund			
If update, please check the appropriate reason(s):			
<input type="radio"/> Change of Committee Name.	Prior Name was: _____		
<input type="radio"/> Change of Filing Location.	Prior Location was: _____		New Location is: _____
<input type="radio"/> Change of Office Sought.	Previous Office Sought: _____		New Office Sought: _____
<input type="radio"/> Change of Treasurer Info	<input checked="" type="checkbox"/> Designation or Change of Deputy Treasurer Info		
<input type="radio"/> Change of address/phone/email for:	<input type="radio"/> Committee	<input checked="" type="radio"/> Treasurer	<input type="radio"/> Deputy Treasurer <input type="radio"/> Candidate
<input type="radio"/> Other	Please Explain: _____		
<b>All Committees</b>			
Full Name of Committee The REPUBLICANS OF NORTHEAST OHIO			PAC # (if Updated)
Street Address 1168 INVERNESS LANE	City STOW	State OH	Zip 44224
Telephone 330-620-5668	Email EHDJ77@MSN.COM		
Treasurer EDWARD DAVIDIAN	Telephone 330-620-5668	Email EHDJ77@MSN.COM	
Street Address 1168 INVERNESS LANE	City STOW	State OH	Zip 44224
Deputy Treasurer (if any)	Telephone	Email	
Street Address	City	State	Zip
<b>Candidate Committees Only</b>			
Full Name of Candidate		Email	
Street Address	City	State	Zip
Office Sought	Subdivision/District	Party Affiliation/Independent/Non-Partisan	Election Year
<b>Political Action Committees Only</b>			
PAC is sponsored by: <input type="radio"/> Labor Organization <input type="radio"/> Corporation <input type="radio"/> Not Sponsored	If Sponsored, Name the Sponsor		Acronym Used (if any)
	If Ballot Issue PAC, list issue		
Is this a Ballot Issue PAC <input type="radio"/> Yes <input type="radio"/> No	PACs and PCEs Only	List any Affiliated PACs/PCEs	
Signature of Treasurer or Deputy Treasurer 		Date (MM/DD/YYYY) 03/07/2024	Signature of Candidate or Authorized Party
			Date (MM/DD/YYYY)

Last Updated 09/2019

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## Statement of Contributions Received

Page     

Form 31-A

ORC 3517.10

Full Name of Committee <i>The Republicans of Northeast Ohio</i>				
Full Name of Contributor <i>Robert of Ohio</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization* <i>Retired</i>		Form (Cash, Check, etc.) <i>check</i>	
City <i>Cuyahoga Falls</i>	State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>44223</i>	Date (MM/DD/YYYY) <i>02/21/2024</i>	Amount <i>1000.<sup>00</sup></i>
Full Name of Contributor <i>Gloria Rogers</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization* <i>Retired</i>		Form (Cash, Check, etc.) <i>check</i>	
City <i>Stow</i>	State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>44224</i>	Date (MM/DD/YYYY) <i>02/21/2024</i>	Amount <i>1000.<sup>00</sup></i>
Full Name of Contributor <i>Carol Luckey</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization* <i>Retired</i>		Form (Cash, Check, etc.) <i>check</i>	
City <i>Stow</i>	State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>44224</i>	Date (MM/DD/YYYY) <i>02/21/2024</i>	Amount <i>1200.<sup>00</sup></i>
Full Name of Contributor <i>Cuy Falls Rep Club</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>	
City <i>Cuyahoga Falls</i>	State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>44223</i>	Date (MM/DD/YYYY) <i>02/09/2024</i>	Amount <i>\$550.</i>
Full Name of Contributor <i>Hudson Rep Club</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>	
City <i>Fairlawn</i>	State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>44333</i>	Date (MM/DD/YYYY) <i>02/21/2024</i>	Amount <i>500</i>

\*Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Page Total *4250.<sup>00</sup>*



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## Statement of Contributions Received

Page \_\_\_\_\_

Form 31-A

ORC 3517.10

Full Name of Committee <i>The Republicans OF NORTHEAST Ohio</i>				
Full Name of Contributor <i>Dan Canahan</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization* <i>Retired</i>		Form (Cash, Check, etc.) <i>check</i>	
City <i>Hudson</i>	State <i>OH</i> <input type="checkbox"/>	Zip Code <i>44236</i>	Date (MM/DD/YYYY) <i>02-01-2024</i>	Amount <i>100</i>
Full Name of Contributor <i>Dale Kramer</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization* <i>Retired</i>		Form (Cash, Check, etc.) <i>check</i>	
City <i>Hudson</i>	State <i>OH</i> <input type="checkbox"/>	Zip Code <i>44236</i>	Date (MM/DD/YYYY) <i>02-13-2024</i>	Amount <i>100</i>
Full Name of Contributor <i>Bert D. Joyce</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>	
City <i>Barberton</i>	State <i>OH</i> <input type="checkbox"/>	Zip Code <i>44203</i>	Date (MM/DD/YYYY) <i>02-01-2024</i>	Amount <i>\$100.</i>
Full Name of Contributor <i>JOHN Greven</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization* <i>Retired</i>		Form (Cash, Check, etc.) <i>check</i>	
City <i>AKRON</i>	State <i>OH</i> <input type="checkbox"/>	Zip Code <i>44312</i>	Date (MM/DD/YYYY) <i>02-13-2024</i>	Amount <i>100.</i>
Full Name of Contributor <i>Charles Ault</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization* <i>Retired</i>		Form (Cash, Check, etc.) <i>check</i>	
City <i>STOW</i>	State <i>OH</i> <input type="checkbox"/>	Zip Code <i>44224</i>	Date (MM/DD/YYYY) <i>02/15/2022</i>	Amount <i>\$100 150.</i>

\*Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Page Total

550<sup>00</sup>

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## Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee <i>The Republican of Northeast Ohio</i>				
Full Name of Contributor <i>William Dean</i>			Registration Number, if PAC	
Street Address [REDACTED]	Employer/Occupation/Labor Organization* <i>Ret</i>		Form (Cash, Check, etc.) <i>CHECK</i>	
City <i>STOW</i>	State <i>OH</i>	Zip Code <i>44224</i>	Date (MM/DD/YYYY) <i>02/23/2024</i>	Amount <i>\$50</i>
Full Name of Contributor <i>EDWARD DAVIDIAN</i>			Registration Number, if PAC	
Street Address <i>1168 INVERNESS Lane</i>	Employer/Occupation/Labor Organization* <i>Retired</i>		Form (Cash, Check, etc.) <i>check</i>	
City <i>STOW</i>	State <i>OH</i>	Zip Code <i>44224</i>	Date (MM/DD/YYYY) <i>02/23/2024</i>	Amount <i>385.00</i>
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount

\*Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Page Total

*50.435<sup>00</sup>*



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## Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee <i>The Republicans of Northeast Ohio (PAC)</i>			
Full Name of Contributor <i>The Republicans of Summit County</i>		Registration Number, if PAC <i>PAC</i>	
Street Address <i>1168 INVERNESS Lane</i>	Type* Refund	Date (MM/DD/YYYY) <i>2/1/2024</i>	Form (Cash, Check, etc.) <i>Dir Deposit</i>
City <i>STOW</i>	State OH	Zip Code <i>44224</i>	Amount <i>833.91</i>
Full Name of Contributor <i>EDWARD LAVINIAN</i>		Registration Number, if PAC	
Street Address <i>1168 INVERNESS Lane</i>	Type* Refund	Date (MM/DD/YYYY) <i>02/21/2024</i>	Form (Cash, Check, etc.) <i>Dir Deposit</i>
City <i>STOW</i>	State OH	Zip Code <i>44224</i>	Amount <i>3000.00</i>
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount

\* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

Page Total \$ *3833.91*

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Page \_\_\_\_\_

## Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee <i>The Republicans of Northeast Ohio</i>			
To Whom Paid <i>Fifth Third Bank</i>		Date (MM/DD/YYYY) <i>02/14/2024</i>	Amount <i>36.99</i>
Street Address <i># 911 Graham Rd</i>		Purpose <i>CheekBOOK</i>	
City <i>STOW</i>	State <i>OH</i>	Zip Code <i>44224</i>	Check Number <i>Direct Withdrawal</i>
To Whom Paid <i>Labels + Letters</i>		Date (MM/DD/YYYY)	Amount <i>557.08</i>
Street Address <i>1533 Commerce DR</i>		Purpose <i>Labeling</i>	
City <i>STOW</i>	State <i>OH</i>	Zip Code <i>44224</i>	Check Number <i>102</i>
To Whom Paid <i>USPS</i>		Date (MM/DD/YYYY) <i>02/22/2024</i>	Amount <i>4704.16</i>
Street Address <i>3900 Darrow Rd</i>		Purpose <i>POSTAGE</i>	
City <i>STOW</i>	State <i>OH</i>	Zip Code <i>44224</i>	Check Number <i>101</i>
To Whom Paid <i>Citi Bank Visa</i>		Date (MM/DD/YYYY) <i>03/04/2024</i>	Amount <i>3050.00</i>
Street Address <i>P.O. Box 790046</i>		Purpose <i>PRINTING + STAMPS</i>	
City <i>ST. LOUIS</i>	State <i>MO</i>	Zip Code <i>63179</i>	Check Number <i>103</i>
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State <i>OH</i>	Zip Code	Check Number

Page Total \$ *8348.23*



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Page \_\_\_\_\_

## Statement of Loans Received

Form 31-C

R.C. 3517.10

Full Name of Committee <i>The Republicans of Northeast Ohio</i>					
From Whom Received <i>EDWARD DAVIDIAN</i>				Prior Amount	Amt. Incurred this Period <i>\$3000.<sup>00</sup></i>
Street Address <i>1168 INVERNESS LANE</i>					Outstanding Balance <i>\$2000.<sup>00</sup></i>
City <i>STOW</i>	State <i>OH</i>	Zip Code <i>44224</i>	Loans Received This Period		Payments This Period
Date Loan was Originally Incurred (MM/DD/YYYY) <i>02/21/2024</i>			Date of Loan (MM/DD/YYYY) <i>02/21/2024</i>	Amount <i>3000.<sup>00</sup></i>	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 Organization* <i>Retired</i>			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY) Amount
From Whom Received				Prior Amount	Amt. Incurred this Period
Street Address					Outstanding Balance
City	State	Zip Code	Loans Received This Period		Payments 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 Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY) Amount

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also 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 Outstanding Balance to the Cover page (Form No. 30-A).

Total Prior Amount \$ *3000.<sup>00</sup>*

Total Received This Period \$ *3000.<sup>00</sup>* (also record on Form 31-A-2)

Total Payments Received this Period \$ *3000.<sup>00</sup>* (also record on Form 31-B)

Total Outstanding Balance \$ *3000.<sup>00</sup>* (also record on Form 30-A)