

7

Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

| | | | | | | | | | |
|---|--|--|--------------------|--|--------------------------------|--|---------------------------------------|--|--|
| Full Name of Committee Committee to Elect Bryan Steward | | | | | | | | | |
| To Whom Owed Bryan Steward | | | | | Prior Amount 1074.43 | | Amt. Incurred this Period 0 | | |
| Address 630 East Broad Street | | | | | Item or Purpose of Debt | | Outstanding Balance 1074.43 | | |
| City Cols OH | | | State OH | | Zip Code 43215 | | Payments This Period | | |
| Date Debt was originally Incurred | | | | | Date | | Amount | | |
| Registration Number, if PAC | | | | | M D Y | | M D Y \$ | | |
| To Whom Owed | | | | | Prior Amount | | Amt. Incurred this Period | | |
| Address | | | | | Item or Purpose of Debt | | Outstanding Balance | | |
| City | | | State | | Zip Code | | Payments This Period | | |
| Date Debt was originally Incurred | | | | | Date | | Amount | | |
| Registration Number, if PAC | | | | | M D Y | | M D Y \$ | | |
| To Whom Owed | | | | | Prior Amount | | Amt. Incurred this Period | | |
| Address | | | | | Item or Purpose of Debt | | Outstanding Balance | | |
| City | | | State | | Zip Code | | Payments This Period | | |
| Date Debt was originally Incurred | | | | | Date | | Amount | | |
| Registration Number, if PAC | | | | | M D Y | | M D Y \$ | | |
| To Whom Owed | | | | | Prior Amount | | Amt. Incurred this Period | | |
| Address | | | | | Item or Purpose of Debt | | Outstanding Balance | | |
| City | | | State | | Zip Code | | Payments This Period | | |
| Date Debt was originally Incurred | | | | | Date | | Amount | | |
| Registration Number, if PAC | | | | | M D Y | | M D Y \$ | | |

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.

Total Payments this Period \$ 0 (also record on Form 31-B)

Total Outstanding Balance \$ Forgiven (also record on cover page)