## FOR PAPER FILING ONLY

31-N R.C. 3517.10

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Page		

## **Statement of Outstanding Debts**

Prescribed by Secretary of State 2/01

Full Name of Committee		<del></del>					
New Albany for Kids							
To Whom Owed	·	-		Prior Amou			Amt. Incurred this Period
King Strategic Communications, Inc.				186.52			0
Address				ltem or Purp	ose of Debi		Outstanding Balance
750 Cross Pointe Blvd Suite N				Prin	ting/M	ailing	186.52
Gahanna	OH	Zip Code 43230	)	Payments This Period Date Amount			
Date Debt was originally incurred	0 9	2 0	1 2	M	D	Y	S
Registration Number, if PAC	L '	<u> </u>	. :	M	D	Y	
						į	<u> </u>
				M	D	Y,	
To Whom Owed				Prior Amou	mt (	•	Amt. Incurred this Period
Address				ltem or Purp	ose of Debt	<del></del>	Outstanding Balance
City	Sta te OH	Zip Code			Payments This Period Date Amount		
Date Debt was originally Incurred	М	D :	Y	М	D :	Y	S
Registration Number, if PAC	<u> </u>	_11	<u>-</u>	М	D	Y	
	_	-		М	D	Y,	
						1	
To Whom Owed				Prior Amou	πt		Amt. Incurred this Period
Address				ltem or Pur	pose of Debt	<u> </u>	Outstanding Balance
City	Sta te	Zip Code				Parameter	This Period
	ОН	43230			Date		Amount
Date Debt was originally Incurred	М	D	Y	М	D	Y	
Registration Number, if PAC	<u></u>			М	D	Y	
				М	D	Y	
				1		1	<u> </u>
If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Tra-	nsfer total of	all payment	made in	this period to	the Stateme	nt of Expend	litures (Form No. 31-B). Total amoun

if a debt is forgiven, write "Forgiven" in the "Outstanding Balane or given should be included in the In-Kind Contributions Receiv	ce" column. Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Total amount ed (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.
Total Payments this Period \$ 0	
Total Outstanding Balance \$	(also record on cover page)