

Statement of Outstanding Debts

Form 31-N R.C. 3517.10

To Whom Owed		Prior Amount		t Incurred this Period
Christian Peck		0	\$982.50	
Street Address		Item or Purpose of Debt	Outstanding Balance	
122 Oklahoma Ave		Yard Signs	\$982.50	
State	Zip Code		· · · · · ·	
ОН	43230	Payments This Period		
as Originally Inc	urred (MM/DD/YYYY)	Date of Payment (MM/DD/YYYY) Amount		
	04/03/2019			
		Date of Payment (MM/DD/YYYY) Amount		
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		Date of Payment (MM/DD/YYYY) Amount		Amount
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		Prior Amount	Amoun	t Incurred this Period
Stephen Renner		0	\$527.09	
Street Address		Item or Purpose of Debt	Outstanding Balance	
740 Quaker Ridge Court		Postage, Consulting \$527.09		
State	Zip Code	Payments This Period		
ОН	43230			
as Originally Inc	urred (MM/DD/YYYY)	Date of Payment (MM/DD/YYYY) Amount		
	04/13/2019			
, if PAC		Date of Payment (MM/DD/YYYY)		Amount
		Date of Payment (MM/DD/YYYY) Amount		
				
	OH as Originally Inc	OH 43230 as Originally Incurred (MM/DD/YYYY) 04/03/2019 State Zip Code OH 43230 as Originally Incurred (MM/DD/YYYY)	Item or Purpose of Debt Yard Signs State Zip Code OH 43230 Payment O4/03/2019 Date of Payment (MM/DD/Y) Date of Payment (MM/DD/Y) Prior Amount O Item or Purpose of Debt Postage, Consulting State Zip Code OH 43230 Payment O4/13/2019 Date of Payment (MM/DD/Y) Date of Payment (MM/DD/Y) Prior Amount O Item or Purpose of Debt Postage, Consulting Date of Payment (MM/DD/Y) Date of Payment (MM/DD/Y)	State Zip Code OH 43230 Payments This State OH 43230 Date of Payment (MM/DD/YYYY) O4/03/2019 Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Prior Amount O \$527. Item or Purpose of Debt Postage, Consulting \$527. State Zip Code OH 43230 Payments This Oate of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM/DD/YYYY) Date of Payment (MM

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 \$	(also record on Form 31-B)
Total Outstanding Balance \$	(also record on cover page)