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Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

F. (I.V.)				
Full Name of Committee BRESSMAN FOR BOARD				
To Whom Owed			Prior Amount	Amt. Incurred this Period
KAREN R. BRESSMAN				\$28.00
Address			Item or Purpose of Debt	Outstanding Balance
8633 BROADACRE DRIVE	<u></u>		RIBBON	\$28.00
City POWELL	Sta te OH	Zip Code 43065	Payments This Period Date Amount	
Date Debt was originally Incurred	0 9	D Y 3	M D Y	S
Registration Number, if PAC		<u> </u>	M D Y	
		*, .	M D Y	
To Whom Owed			Prior Amount	Aint, Incurred this Period
KAREN R. BRESSMAN				\$138.00
Address 8633 BROADACRE DRIVE			Item or Purpose of Debt MAILERS	Outstanding Balance \$138.00
City	Sta te	Zip Code	Payments This Period	
POWELL	OH M	43065	Date M D Yi	Amount
Date Debt was originally Incurred	1 0	3 0 1 3		
Registration Number, if PAC			M D Y	
· · · · · · · · · · · · · · · · · · ·	*		M D Y	
To Whom Owed			Prior Amount	Amt. Incurred this Period
KAREN R. BRESSMAN				\$438.65
Address			Item or Purpose of Debt	Outstanding Balance
8633 BROADACRE DRIVE		1 2:- C-1-	THIS WEEK ADVERTISEMENT	\$438.65
City POWEŁL	Starte OH	Zip Code 43065	Payments This Period Date Amount	
Date Debt was originally Incurred	м 1 0	3 1 1 3	M D Y	\$
Registration Number, if PAC			M D Y	
		· ·	M D Y	
	<u></u>			

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 \$	\$0.00	(also record on Form 31-B)
Total Outstanding Balance \$	\$604.65	(also record on cover page)