

# Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
|---------------------------------------------------------------------|--|--|--|---------------------|---|---------------------------------------------|---|------------------------------------------|---|
| Full Name of Committee<br><b>Citizens for a Better Reynoldsburg</b> |  |  |  |                     |   |                                             |   |                                          |   |
| To Whom Owed<br><b>Capitol Citicom, Inc</b>                         |  |  |  |                     |   | Prior Amount<br><b>1,520.00</b>             |   | Amt. Incurred this Period<br><b>0.00</b> |   |
| Address<br><b>2225 Citygate Dr. Ste A</b>                           |  |  |  |                     |   | Item or Purpose for Debt<br><b>Printing</b> |   | Outstanding Balance<br><b>FORGIVEN</b>   |   |
| City<br><b>Columbus</b>                                             |  |  |  | State<br><b>O H</b> |   | Zip Code<br><b>43219</b>                    |   | Payments Made This Period<br>Date Amount |   |
| Date Debt was originally Incurred                                   |  |  |  | M                   | D | Y                                           | M | D                                        | Y |
|                                                                     |  |  |  | 1                   | 1 | 1                                           | 5 | 1                                        | 3 |
|                                                                     |  |  |  | 0                   | 9 | 1                                           | 7 | 1                                        | 4 |
|                                                                     |  |  |  |                     |   |                                             |   | \$ 736.46                                |   |
| Registration Number, if PAC                                         |  |  |  |                     |   | M                                           | D | Y                                        |   |
|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
|                                                                     |  |  |  |                     |   | M                                           | D | Y                                        |   |
|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
| To Whom Owed                                                        |  |  |  |                     |   | Prior Amount                                |   | Amt. Incurred this Period                |   |
| Address                                                             |  |  |  |                     |   | Item or Purpose for Debt                    |   | Outstanding Balance                      |   |
| City                                                                |  |  |  | State               |   | Zip Code                                    |   | Payments Made This Period<br>Date Amount |   |
| Date Debt was originally Incurred                                   |  |  |  | M                   | D | Y                                           | M | D                                        | Y |
|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
| Registration Number, if PAC                                         |  |  |  |                     |   | M                                           | D | Y                                        |   |
|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
|                                                                     |  |  |  |                     |   | M                                           | D | Y                                        |   |
|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
| To Whom Owed                                                        |  |  |  |                     |   | Prior Amount                                |   | Amt. Incurred this Period                |   |
| Address                                                             |  |  |  |                     |   | Item or Purpose for Debt                    |   | Outstanding Balance                      |   |
| City                                                                |  |  |  | State               |   | Zip Code                                    |   | Payments Made This Period<br>Date Amount |   |
| Date Debt was originally Incurred                                   |  |  |  | M                   | D | Y                                           | M | D                                        | Y |
|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
|                                                                     |  |  |  |                     |   |                                             |   |                                          |   |
| 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 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 \$ 736.46 (also record on Form 31-B)

Total Outstanding Balance \$ .00 (\$783.50 debt forgiven) (also record on cover page)