Total Outstanding Balance \$

| Page | 5 | |
|------|---|--|
| | | |

Statement of Outstanding Debts

| Prescribed by Secretar | y of State | 2/01 | | |
|-----------------------------------|--|---|---------------------------------------|---------------------------------|
| Full Name of Committee | | | | |
| CITIZENS FOR RANKIN To Whom Owed | | | Prior Amount | Amt. Incurred this Period |
| | • | | 2,201. | |
| MIKE R. RANKIN | | | Item or Purpose for De | |
| Address | | | 1 | |
| 2432 WYNCOURTNEY COURT | State | Zip Code | GNS, MAGNE 2,201.11 | |
| POWELL | OH | | Payme Date | ents Made This Period Amount |
| Date Debt-was originally Incurred | М | D Y | M D | Y \$ |
| | 0 6 | 1 6 0 4 | | |
| Registration Number, if PAC | | | M D | Y |
| | | | | |
| | | | M D | Y |
| | | | • 1. • 1 | |
| To Whom Owed | | | Prior Amount | Amt. Incurred this Period |
| | | • | | |
| Address | | | Item or Purpose for De | bt Outstanding Balance |
| | | | | |
| City | State | Zip Code | Down | ents Made This Period |
| | | | Date | Amount |
| Date Debt was originally incurred | M | D Y | M D | Y \$ |
| Date Debt was originally meunice | | | | |
| Registration Number, if PAC | | - | M D | Y |
| | | • | | |
| | - . | | M D | Y |
| | | | | |
| To Whom Owed | | | Prior Amount | Amt. Incurred this Period |
| 10 whom Owed | | | | |
| • | | | Item or Purpose for De | ebt Outstanding Balance |
| Address | . : | | | |
| | Ctoto | Trin Codo | | |
| City | State | Zip Code | Payments Made This Period Date Amount | |
| | 1 1 | D V | <u> </u> | Y \$ |
| Date Debt was originally Incurred | М | D Y | M D | |
| | <u>. </u> | | | |
| Registration Number, if PAC | | | M D | Y |
| | | | | |
| | | | | |
| | | | M D | Y |