| Page 1 | |
|--------|--|

Statement of Outstanding Debts

| Prescribed by Secretar | y of Stat | e 2/01 | Į. | | | | | | | |
|--|-----------|-------------|--------|-------|---------|--|-------------|------------|---------------------------|--|
| Full Name of Committee | | | | | | | | | | |
| Friends for Paul Bingle | | | | | _ | Prior An | nount | | Amt. Incurred this Period | |
| o Whom Owed | | | | | | | | 3.83 | 894.25 | |
| Paul Bingle ddress | | | | | | Item or I | urpose for | | Outstanding Balance | |
| 408 E Schreyer Pl | | | | | | uppo | ort Ac | tivitie | 894.25 | |
| City | State | Zip | Cod | e | | | | | Made This Period | |
| Columbus | OF | OH 43214 | | | | Date | · . | Amount | | |
| Date Debt was originally Incurred | М | | D | 1 | Ϋ́ | М | D | Y | \$ | |
| The second secon | 0 2 | 2 0 | 5 | 0 | 7 | 1 1 | | | 2,643.83 | |
| Registration Number, if PAC | | | | | | M | D | Y | | |
| | | | | | | M | D | Ÿ | | |
| | | | | | | IVI | | 1 | | |
| T. NA O I | | | | | | Prior A | nount | | Amt. Incurred this Period | |
| To Whom Owed | | | | | | | | | | |
| Address | | | | | | Item or | Purpose fo | r Debt | Outstanding Balance | |
| | | | | | | | | | | |
| City | State | Zi | p Cod | le | | Payments Date | | | Made This Period | |
| | | | | | | | | | Amount | |
| Date Debt was originally Incurred | d M | | D | | Y | M | D | Y | \$ | |
| Registration Number, if PAC | | | | | | M | D | Y | | |
| | | | | | | M | | Y | | |
| | | | | | | | | 1 | 1 | |
| To Whom Owed | | | | | | Prior Amount | | | Amt. Incurred this Period | |
| | | | | | | | | | | |
| Address | | | | | | Item or | Purpose f | or Debt | Outstanding Balance | |
| | | | | | | | | | | |
| City | Stat | e Z | ip Co | de | | Payments Made This Period Date Amount | | | | |
| Date Debt was originally Incurre | d M | 十 | D | T | Y | М | D | Y | \$ | |
| | | - | | | | | | | | |
| Registration Number, if PAC | | | | | | М | D | Y | | |
| | | | | | | | | | | |
| | | | | | | M | D | Y | | |
| | | | | | | | | | | |
| If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all p | avments | made | this t | perio | d to tl | ne Staten | nent of E | spenditur | es (Form No. 31-B). | |
| If a debt is forgiven, write Forgiven in the Constanting Barante Column. National of the Form No. 31-J | -1). Tran | sfer t | otal o | utsta | nding | debt am | ount to the | e cover pa | rge. | |
| | | | | | | | | | | |

2,643.83 (also record on Form 31-B) Total Payments this Period \$ 894.25 (also record on cover page) Total Outstanding Balance \$