Page	

## **Statement of Outstanding Debts**

1100 Bedlington Court 700.00		-	State								
Fee Nation Number, if PAC   Payments   Page   Payments   Page   Payments   Page   Payments   Page   Page	Full Name of Committee										<del></del>
Richard Harris											
Address   1100 Bed lington Court	1							ount			Amt. Incurred this Period
T100 Bedlington Court											
State   Zip Code   O	Address						Item or P	urpose fe	or Debt		Outstanding Balance
Reynoldsburg									_		700.00
Date Debt was originally Incurred   M	City	St	ate	Zip Co	ode			P	aymen	ts N	Tade This Period
Registration Number, if PAC    O   3   O   1   O   5   O   4   T   O   1   5   Z/7.04   M   D   Y		0	Н	43	3068			Date			Amount
Registration Number, if PAC    O   3   O   1   O   5   O   4   T   O   1   5   277.04   M   D   Y	Date Debt was originally Incu	rred M		D	Y		М	D	Y		\$
Fo Whom Owed    Prior Amount   Amt. Incurred this Period		0	3	0   1	t   0	5	$0 \mid 4$	10	1	5	277.04
Fro Amount Amt. Incurred this Period  Address    Item or Purpose for Debt   Outstanding Balance	Registration Number, if PAC						М	D	Y		
Fo Whom Owed  Address    State   Zip Code   Payments Made This Period Date   Amount											
Fowhom Owed  Address  Registration Number, if PAC  Prior Amount  Amt. Incurred this Period  Outstanding Balance  Payments Vale This Period  Date Debt was originally Incurred  M D Y M D Y  Amt. Incurred this Period  Date Debt was originally Incurred  M D Y  M D Y  Amt. Incurred this Period  Date Debt was originally Incurred  M D Y  Amt. Incurred this Period  Date Debt was originally Incurred  Amt. Incurred this Period  Date Debt was originally Incurred  Amt. Incurred this Period  Date Debt was originally Incurred  Amt. Incurred this Period  Date Debt was originally Incurred  M D Y  Amt. Incurred this Period  Date Debt was originally Incurred  M D Y  M D Y  S  Registration Number, if PAC  M D Y  M D Y  M D Y  S  Registration Number, if PAC							М	D	Y		
Address    State   Zip Code   Payments Made This Period Date   Amount											
City    State   Zip Code   Payments Made This Period Date   Amount	To Whom Owed						Prior An	nount			Amt. Incurred this Period
City    State   Zip Code   Payments Made This Period Date   Amount											
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If a debt is foroiven write "Foroiven" in the '	'Outstanding Balance' column. Transfer to	otal of all payments made this period to the Statement of Expenditures (Fo	vrm No. 31-8)
•	•	n No. 31-J-1). Transfer total outstanding debt amount to the cover page.	
Total Payments this Period \$	277.04 (al	also record on Form 31-B)	
Total Outstanding Balance \$		lso record on cover page)	