



Statement of Outstanding Debts

Form 31-N
R.C. 3517.10

Full Name of Committee Reynolds for Grandview				
To Whom Owed Steven R. Reynolds			Prior Amount \$0	Amount Incurred this Period \$4,995.46
Street Address 1070 Virginia Ave			Item or Purpose of Debt See attached exhibit.	Outstanding Balance \$4,995.46
City Grandview Heights	State OH	Zip Code 43212	Payments This Period	
Date Debt was Originally Incurred (MM/DD/YYYY) 03/20/2019			Date of Payment (MM/DD/YYYY) ----	Amount
Registration Number, if PAC			Date of Payment (MM/DD/YYYY)	Amount
			Date of Payment (MM/DD/YYYY)	Amount
To Whom Owed			Prior Amount	Amount Incurred this Period
Street Address			Item or Purpose of Debt	Outstanding Balance
City	State	Zip Code	Payments This Period	
Date Debt was Originally Incurred (MM/DD/YYYY)			Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC			Date of Payment (MM/DD/YYYY)	Amount
			Date of Payment (MM/DD/YYYY)	Amount

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 (also record on Form 31-B)

Total Outstanding Balance \$ 4,995.46 (also record on cover page)