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Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Non- of Committee		· · · · · · · · · · · · · · · · · · ·				
Full Name of Committee Tamara Shanyfelt for Jackson Twp Fiscal Officer						
			Prior Ame	ount		Amt. Incurred this Period
To Whom Owed				0.00		\$1,535.82
William Byrd						Outstanding Balance
Address				Item or Purpose of Debt t-shirts and signs		\$1,535.82
4232 Kelnor Dr	Sto 4-	Zip Code	1-31	w and sig	y, 13	
City Grove City	Sta te OH	43123		Date	Payments '	This Period Amount
Date Debt was originally incurred	0 9	D Y	1 M	D	Y	\$.
Registration Number, if PAC	<u> </u>		М	D	Y	
	Ŧ		M	D	Y	
To Whom Owed			Prior Am	ount	<u>, , , , , , , , , , , , , , , , , , , </u>	Amt. Incurred this Period
Address			Item or P	urpose of Debt		Outstanding Balance
City	Stal te OH	Zip Code		Payments This Period Date Amount		
Date Debt was originally Incurred	M	D Y	M	D	Y	\$
Registration Number, if PAC	. 	<u> </u>	М	D	Y	:
		•	M	D	Y	
To Whom Owed			Prior Am	iount	*****	Amt. Incurred this Period
Address			Item or P	Purpose of Debt	Ī	Outstanding Balance
City	Starte OH	Zip Code		Date	Payments	This Period Amount
Date Debt was originally incurred	M	D Y	M	D	Y	S
Registration Number, if PAC	<u> </u>	<u> </u>	M	D	Y	
			M	D	Y	
	_					10 /0 ht 3

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 \$	\$0.00	(also record on Form 31-B)
Total Outstanding Balance \$	\$1,535.82	(also record on cover page)