

## OFFICE OF THE Ohio Secretary of State

## **Statement of Outstanding Debts**

Form 31-N R.C. 3517.10

Full Name of Committee					
Counter to Elect Loni Ti	- DENT				
To Whom Owed			Prior Amount	Amount Incurred this Period	
Lor, Toens			-0-	\$30.0°	
Street Address			Item or Purpose of Debt		nding Balance
			Bd. & Elsatan phy	5	30 <sup>,4</sup>
City	State	Zip Code	Down to This Boat of		
Collab	OH	43221	Payments This Period		
Date Debt was Originally Incurred (MM/DD/YYYY) 7/25/19		Date of Payment (MM/DD/YYYY) Amount		Amount	
Registration Number, if PAC			Date of Payment (MM/DD/YY	<b>YY</b> )	Amount
			Date of Payment (MM/DD/YY	YY)	Amount
To Whom Owed Elly Trent William			Prior Amount	_	
Straat Addrage		Ross	Item or Purpose of Debt Adventising	i	ading Balance
City (Schools	State	Zip Code 43228	Payments This Period		
	ginally Incu	rred (MM/DD/YYYY)	Date of Payment (MM/DD/Y)	YY)	Amount
Registration Number, if PAC	•		Date of Payment (MM/DD/Y)	<b>YY</b> )	Amount
			Date of Payment (MM/DD/Y)	YY)	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 \$	345.ª	(also record on cover page)