

## Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

| Full Name of Committee<br><b>Franklin County Republican Party - Campaign</b> |  |                     |        |                          |                                    |                                                                                                                                                           |   |                                            |  |                      |  |  |        |      |  |  |
|------------------------------------------------------------------------------|--|---------------------|--------|--------------------------|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---|--------------------------------------------|--|----------------------|--|--|--------|------|--|--|
| To Whom Owed<br><b>Michael F. Colley</b>                                     |  |                     |        |                          | Prior Amount<br><b>\$11,578.06</b> |                                                                                                                                                           |   | Amt. Incurred this Period<br><b>\$0.00</b> |  |                      |  |  |        |      |  |  |
| Address<br><b>536 South High St.</b>                                         |  |                     |        |                          | Item or Purpose of Debt            |                                                                                                                                                           |   | Outstanding Balance<br><b>\$11,578.06</b>  |  |                      |  |  |        |      |  |  |
| City<br><b>Columbus</b>                                                      |  | St. to<br><b>OH</b> |        | Zip Code<br><b>43206</b> |                                    | <table border="1"> <tr> <th colspan="3">Payments This Period</th> <th rowspan="2">Amount</th> </tr> <tr> <th>Date</th> <th></th> <th></th> </tr> </table> |   |                                            |  | Payments This Period |  |  | Amount | Date |  |  |
| Payments This Period                                                         |  |                     | Amount |                          |                                    |                                                                                                                                                           |   |                                            |  |                      |  |  |        |      |  |  |
| Date                                                                         |  |                     |        |                          |                                    |                                                                                                                                                           |   |                                            |  |                      |  |  |        |      |  |  |
| Date Debt was originally Incurred                                            |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y | \$                                         |  |                      |  |  |        |      |  |  |
| Registration Number, if PAC                                                  |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y |                                            |  |                      |  |  |        |      |  |  |
|                                                                              |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y |                                            |  |                      |  |  |        |      |  |  |
| To Whom Owed                                                                 |  |                     |        |                          | Prior Amount                       |                                                                                                                                                           |   | Amt. Incurred this Period                  |  |                      |  |  |        |      |  |  |
| Address                                                                      |  |                     |        |                          | Item or Purpose of Debt            |                                                                                                                                                           |   | Outstanding Balance                        |  |                      |  |  |        |      |  |  |
| City                                                                         |  | St. to              |        | Zip Code                 |                                    | <table border="1"> <tr> <th colspan="3">Payments This Period</th> <th rowspan="2">Amount</th> </tr> <tr> <th>Date</th> <th></th> <th></th> </tr> </table> |   |                                            |  | Payments This Period |  |  | Amount | Date |  |  |
| Payments This Period                                                         |  |                     | Amount |                          |                                    |                                                                                                                                                           |   |                                            |  |                      |  |  |        |      |  |  |
| Date                                                                         |  |                     |        |                          |                                    |                                                                                                                                                           |   |                                            |  |                      |  |  |        |      |  |  |
| Date Debt was originally Incurred                                            |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y | \$                                         |  |                      |  |  |        |      |  |  |
| Registration Number, if PAC                                                  |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y |                                            |  |                      |  |  |        |      |  |  |
|                                                                              |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y |                                            |  |                      |  |  |        |      |  |  |
| To Whom Owed                                                                 |  |                     |        |                          | Prior Amount                       |                                                                                                                                                           |   | Amt. Incurred this Period                  |  |                      |  |  |        |      |  |  |
| Address                                                                      |  |                     |        |                          | Item or Purpose of Debt            |                                                                                                                                                           |   | Outstanding Balance                        |  |                      |  |  |        |      |  |  |
| City                                                                         |  | St. to              |        | Zip Code                 |                                    | <table border="1"> <tr> <th colspan="3">Payments This Period</th> <th rowspan="2">Amount</th> </tr> <tr> <th>Date</th> <th></th> <th></th> </tr> </table> |   |                                            |  | Payments This Period |  |  | Amount | Date |  |  |
| Payments This Period                                                         |  |                     | Amount |                          |                                    |                                                                                                                                                           |   |                                            |  |                      |  |  |        |      |  |  |
| Date                                                                         |  |                     |        |                          |                                    |                                                                                                                                                           |   |                                            |  |                      |  |  |        |      |  |  |
| Date Debt was originally Incurred                                            |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y | \$                                         |  |                      |  |  |        |      |  |  |
| Registration Number, if PAC                                                  |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y |                                            |  |                      |  |  |        |      |  |  |
|                                                                              |  |                     |        |                          | M                                  | D                                                                                                                                                         | Y |                                            |  |                      |  |  |        |      |  |  |

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 \$ **\$11,578.06** (also record on cover page)