31-N R.C. 3517.10

## **Statement of Outstanding Debts**

Prescribed by Secretary of State 2/0

	Of Blace						
Full Name of Committee							
Paini For Trustee	:						<del>,</del>
To Whom Owed				Prior Amount			Amt. Incurred this Period
Victor Paini				4,754.02			0.00
Address	•				-		Outstanding Balance
7296 Porter Dr				King	Payi	ment .	Forgiven
City Canal Winchester	State OH	Zip Cod 43	110	Payments Made This Date			Aade This Period Amount
DateDebtwasoriginallyllicured	м 1   0	D 1 6	Y 0   9	М	D	Y 	\$
Registration Number, if PAC	;			M	D	Y 	
	,			M	d	Y 	
To Whom Owed	÷			Prior An	ount		Amt. Incurred this Period
Address				Item or Purpose for Debt Outstanding Balance			
City	State	Zip Cod	e	Payments Made This Period Date Amount			
Date Debt was originally incurred	M·	D	Ϋ́	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 for Debt Outstanding Balance			
City		Zip Coo	ie	Payments Made This Period Date Amount			
ti Date Debt was originally incurred	M	D	Y	М	D	Y	\$
Registration Number, if PAC	:			М	D	Y	
				М	D	Y	

If a debt is forgiven, write "Forgiven" in the " Total amount forgiven should be included in	Outstanding Balance" column. Transfer total of all payments made this period to the Statement of Expenditures (Form No. 31-B). 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 \$ #VALUE! (also record on cover page)