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Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee People for Cope				
To Whom Owed Michael D. Cope			Prior Amount \$5,520.47	Amt, Incurred this Period
Address 4549 Dirham Lane			Item or Purpose of Debt Postcards	Outstanding Balance \$5,520.47
City Hilliard		State Zip Code OH 43026	Payments Date	This Period Amount
Date Debt was originally Incurred		1 1 1 4 0 7	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		State Zip Code	Payments This Period Date Amount	
Date Debt was originally Incurred	\$. ~~	M D Y	M D Y	S
Registration Number, if PAC	'		M D Y	
		A. Comment of the com	M. D. Y	
To Whom Owed			Prior Amount	Amt. Incurred this Period
Address			ltem or Purpose of Debt	Outstanding Balance
City		State Zip Code	Payments Date	This Period Amount
Date Debt was originally Incurred		M D Y	M D Y	S
Registration Number, if PAC			M D Y	
	· ·		M. D. Y	

	nce" column. Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Total amount ived (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.
Total Payments this Period \$	(also record on Form 31-B)

Total Outstanding Balance \$ \$5,520.47 (also record on cover page)