



## **Statement of Outstanding Debts**

Form 31-N R.C. 3517.10

Full Name of Committee Citizens for Tricia Sprankle					
To Whom Owed Michael Sweeney			Prior Amount 0	Amount Incurred this Period 447.01	
Street Address Heil Ave.			Item or Purpose of Debt postage/printing	Outstanding Balance	
City Gahanna	State OH	Zip Code 43230	Payments This Period		s Period
Date Debt	was Originally Inc	urred (MM/DD/YYYY 08/10/2019	Date of Payment (MM/DD/Y	YYY)	Amount
Registration Number, if PAC	· · · · · · · · · · · · · · · · · · ·		Date of Payment (MM/DD/Y	YYY)	Amount
			Date of Payment (MM/DD/Y	YYY)	Amount
To Whom Owed			Prior Amount	Amou	nt Incurred this Period
Street Address			Item or Purpose of Debt Outstanding Balance		
Olty	State	Zip Code	Payments This F		s Period
Date Debt	was Originally Inco	urred (MM/DD/YYYY	Date of Payment (MM/DD/Y	YYY)	Amount
Registration Number, if PAC			Date of Payment (MM/DD/Y	YYY)	Amount
			Date of Payment (MM/DD/Y	YYY)	Amount
f a debt is forgiven, write "Forgiven" in the "Outstanding Form No. 31-B). Total amount forgiven should be includ cover page.					
0					
Total Payments This Period \$		(also reco	rd on Form 31-B)		
447.01 Total Outstanding Balance \$ (at		(also reco	rd on cover page)		