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Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

| Full Name of Committee | • | | | | | |
|-----------------------------------|---------------------------------------|---------------------------------------|-----------------------------------|---------------------------------|----------------|---------------------------|
| McKinley for Judge | | | | | | |
| To Whom Owed | | | - | Prior Amount | | Amt, Incurred this Period |
| Kristen McKinley | Kristen McKinley | | \$25.00 | | | \$0.00 |
| Address | | | Item or Purpose of Debt | | | Outstanding Balance |
| 3656 Cannongate Drive | | | Event Fee | | | \$25.00 |
| City Columbus | Stal te OH | Zip Code 43228 | | Payments This Period Date Amoun | | This Period Amount |
| Date Debt was originally Incurred | 0 4 | 1 7 1 3 | M | D | Y | \$ \$500.00 |
| Registration Number, if PAC | | | М | D | Y | |
| • | | | M | D | Y | |
| To Whom Owed | | | Prior Amour | | | Amt. Incurred this Period |
| Kristen McKinley | | \$47.50 | | | \$0.00 | |
| Address | | | | ose of Debt | | Outstanding Balance |
| 3656 Cannongate Drive | | | Food for Event \$47.50 | | | |
| Ciry Columbus | Stat te OH | Zip Code 43228 | Payments This Period Date Amount | | | |
| Date Debt was originally Incurred | 0 5 | 2 1 1 3 | M | D | Y | \$ |
| Registration Number, if PAC | | | M | D | Y | |
| | 1.5 | | M | D | Y | |
| To Whom Owed | | | Prior Amour | | | Amt. Incurred this Period |
| Kristen McKinley | | | | 0.50 | | \$0.00 |
| Address | | | | ose of Debt | | Outstanding Balance |
| 3656 Cannongate Drive | | 17: 01 | Bevera | ages for | Cvent | \$90.50 |
| Čity Columbus | Starte OH | Zip Code 43228 | Payments This Period Date Amount | | | |
| Date Debt was originally Incurred | M 0 5 | 2 1 1 3 | M | D | Y | 2 |
| Registration Number, if PAC | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | M | D | Y ₊ | |
| | | | M | D | Ÿ | |

| 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). Tota | il amoun |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 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 \$ | \$500.00 | (also record on Form 31-B) |
|-------------------------------|----------|----------------------------|
| Total Outstanding Balance \$ | \$163.00 | (also record on cover page |