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Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

							
Full Name of Committee DEEDS FOR COUNCIL							
Whom Owed CICK Deep 3				Prior Amount			Amt. Incurred this Period
Address	•		•	Item or Purp	ose of Debt	· · · · · · · · · · · · · · · · · · ·	Outslanding Balance
7302 Crossexx CT. Canal Winchester	Sta te	Zip Code		Payments This Period Date Amount			
Date Debt was originally Incurred	M	\ <u>0</u> 3-	1	M	D	Y	s
Registration Number, if PAC	!.1			М	D	Y	
				М	D	Y	
To Whom Owed	· ·			Prior Amount			Amt. Incurred this Period
dress			Item or Purpose of Debt			Outstanding Balance	
City	Sta te	Zip Code	:	Payments This Period Date Amo			This Period Amount
Date Debt was originally Incurred	М	D	Y	М	Date	Y	\$
Registration Number, if PAC		<u> </u>	1 !	М	D	Y	
		Α.		M	D	Y	
To Whom Owed			,	Prior Amou	nt		Amt. Incurred this Period
Address			ltem or Purpose of Debt Outstanding Balance				
City	Sta te Zip Code			Payments This Period Date Amount			
Date Debt was originally Incurred	М	D	Y	М	D	Y	\$
Registration Number, if PAC		L		М	D,	Y	
				М	D	Y	
						 	1

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 \$

(also record on Form 31-B)

Total Outstanding Balance \$

(also record on cover nage)