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## **Statement of Outstanding Debts**

Prescribed by Secretary	of State	2/01						
Full Name of Committee		e podpiera nemena n						
Friends of McGivern								
To Whom Owed					nount		Amt. Incurred this Period	
Kelly McGivern						0.00	0.00	
Address					urpose for		Outstanding Balance	
3257 Northampton Drive					rd Się	gns	1,050.00	
City Hilliard	State OH	Zip Code 43(			Pay Date	yments N	Anount	
Date Debt was originally Incurred	М	D	Y	М	D	Y	\$	
	0 4	0   1	0 9					
Registration Number, if PAC				M	D	Y		
				M	D	Y		
To Whom Owed				Prior An	nount		Aint, Incurred this Period	
Address				Item or P	urpose for	r Debt	Outstanding Balance	
City	State	Zip Code	,		Pa; Date	yments N	Made This Period Amount	
Date Debt was originally Incurred	М	D	Y	M	D	Y	\$	
Registration Number, if PAC	············			M	D	Y		
		e Esp		М	D	Y		
To Whom Owed				Prior Amount Amt. Incurred this Po			Amt. Incurred this Period	
Address				Item or Purpose for Debt			Outstanding Balance	
City	State	Zip Code	•		Pa Date	yments N	Made This Period Amount	
Date Debt was originally Incurred	M	D	Y	М	D	Y	\$	
Registration Number, if PAC		1		М	D	Y		
				M	D	Y		
If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all p Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-	-		-			-	· · · · · · · · · · · · · · · · · · ·	

Registration Number, if PAC				M	D	Y	
				M	D	Y	
f a debt is forgiven, write "Forgiven" in the "Cotal amount forgiven should be included in the		• •	•			-	` '
otal amount forgiven should be included in the	ne in-King Contributions Received (Fe	orm No. 31-J-1). 1ransfer	totai outstandinį	g debt am	ount to u	e cover p	age.
otal Payments this Period \$	0.00	(also record on Form 31-	B)				
otal Outstanding Balance \$	1,050.00	(also record on cover pag	ge)				