Total Outstanding Balance \$ \$1,000.00

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## **Statement of Outstanding Debts**

Prescribed by Secretary of State 2/01

Full Name of Committee iMMIGRANT CITIZENS OF OHIO-PAC				-			
Whom Owed				Prior Amount			Amt. Incurred this Period
Dennis A. Roberge				\$1,000.00			\$0.00
Address 372 Cumberland Drive				Item or Purpose of Debt Consultation			Outstanding Balance \$1,000.00
City Whitehall	Starte OH	Zip Code 43213		Payments This Period Date Amount			
Date Debt was originally incurred  Registration Number, if PAC	1 0	0 1	1 0	M.	D	Y	\$0.00
Registration Number, if PAC	_ <b>!</b>	1		M.	D	Y	
				M	D	Y	
To Whom Owed				Prior Amount			Amt. Incurred this Period
Address				Item or Purpose of Debt			Outstanding Balance
City	Sta te OH	Zip Code		Payments This Period Date A			This Period Amount
Date Debt was originally incurred	. М	D	Y	М	D	Y	\$
Registration Number, if PAC	·1 !			М	D	Y	
	,			M	D	Y	
To Whom Owed		tu er <del>s</del>		Prior Amount			Amt. Incurred this Period
Address				Item or Pur	pose of Debi	t	Outstanding Balance
City	Sta te OH	Zip Code		Payments T			s 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	
If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transforgiven should be included in the In-Kind Contributions Received (Form No. 31-	sfer total of J-1), Transf	all payment er total outst	s made in anding del	this period to of amount to f	the Stateme	nt of Expen	ditures (Form No. 31-B), Total amour
Total Payments this Period \$ \$0.00 (also record on Fe	orm 31-B)						

(also record on cover page)