



Statement of Outstanding Debts

Form 31-B
R.C. 3517.10

Full Name of Committee Citizens to Elect Gansorn				
To Whom Owed Omar Gansorn			Prior Amount 4,917.87	Amount Incurred This Period 0.00
Street Address 1688 Standard Rd			Item or Purpose of Debt Printing	Outstanding Balance 4,917.87
City Columbus	State OH	Zip Code 43212	Payments Received This Period	
Date of Original Loan (MM/DD/YYYY) 10/12/2016			Date of Payment (MM/DD/YYYY)	Amount
Registration Number, IF PAC			Date of Payment (MM/DD/YYYY)	Amount
			Date of Payment (MM/DD/YYYY)	Amount
To Whom Owed			Prior Amount	Amount Incurred This Period
Street Address			Item or Purpose of Debt	Outstanding Balance
City	State OH	Zip Code	Payments Received This Period	
Date of Original Loan (MM/DD/YYYY)			Date of Payment (MM/DD/YYYY)	Amount
Registration Number, IF PAC			Date of Payment (MM/DD/YYYY)	Amount
			Date of Payment (MM/DD/YYYY)	Amount

If a debt is repaid, enter "Repaid" 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 repaid should be included in the Total Contributions Received (Form No. 31-A-B). Transfer total outstanding debt amount to the cover page.

Total Payments This Period \$ 0.00

(also record on Form 31-B)

Total Outstanding Balance \$ 4,917.87

(also record on cover page)