## **Statement of Outstanding Debts**

Prescribed by Secretar	ry of State	e 2/01						
Full Name of Committee								
Committee for Monica DeBrock								
To Whom Owed							Amt. Incurred this Period	
Monica DeBrock					49	5.00		0.00
Address				ltem or P	urpose for	Debt	Outstanding Balance	
7400 E. Bryden Road				SIG	VROC	CKET	0.00	
City	State	Zip Co	de		Pa	yments M	Tade This Period	
Reynoldsburg	ОН	43	3068		Date		Amount	
Date Debt was originally Incurred	м 0 3	2)2	Y 2 1 3	м 1 0	D 2 9	Y 114	s 495.00	
Registration Number, if PAC	1012	1212	1113	M	412 D	1 <del>1 4</del> У	495.00	
						1	:	
				М	D	Y		
				1				
To Whom Owed				Prior An	nount		Amt. Incurred this Per	iod
Monica DeBrock					25	6.20		0.00
Address				ltem or P	urpose for	Debt	Outstanding Balance	
7400 E. Bryden Road				HO	TCA	RDS	76.20 FORGI	VEN
City	State	Zip Co	de		Pa	yments N	Tade This Period	
Reynoldsburg	OH		3068		Date		Amount	
Date Debt was originally Incurred		D	Y	M	Ð	1	S	
	0 3	2 7	1 3	1 0	<u> </u>		180.00	
Registration Number, if PAC				M	D	Y		
				M	D .	Y		
				1				
To Whom Owed				Prior An	nount		Amt. Incurred this Peri	iod
Address				item or P	urpose for	Debt	Outstanding Balance	
City	State	Zip Co	de		Pa Date	ушенts Л	Made This Period Amount	
Date Debt was originally Incurred	M	D	Y	M 	D	Y	S	
Registration Number, if PAC	- :	-	•	M	D	Ϋ́		
				M	D	Y	<del></del>	
				[43]		,		
				1	<u>'</u>	1 !	<u>.                                    </u>	
If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all J	payments	made thi	is period to	the State	ment of	Expendito	ures (Form No. 31-B).	

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Registration Number, if PAC	•	· · · ·					М	D	Y	
							М	D	Y	
									1	
•	iven" in the "Outstanding Balance" colum included in the In-Kind Contributions R									
Total Payments this Period \$	6	75.00 (2	also record on	Form 3	1-B)					
Total Outstanding Balance \$	0.00 (\$76.20 debt for	given) (2	also record on	cover p	age)					