## **Statement of Outstanding Debts**

Prescribed by Secretary of State 2/01

Full Name of Committee			_				
GLASGOW FOR COUNCIL To Whom Owed			Tr.	Prior An	nount		Amt, Incurred this Period
			ľ	rioi zu	ilount	0.00	
MALCOLM M. GLASGOW				tanı or D	urpose fo	0.00	45.00 Outstanding Balance
Address			ľ	cent of 1			Ť
793 LINDENHAVEN ROAD	State	Zip Code	ŀ		FEE		45.00
City		-		Payments M Date			Ande This Period Amount
GAHANNA	ОН	43230		M		Y	Antount le
Date Debt was originally Incurred				IVI	D	1	* -
	0 8	1 7 1	5		D	Y	
Registration Number, if PAC				M	D	ĭ	ļ
				M	D	v	
				М	D	Y	
				rior An	nount		Amt. Incurred this Period
To Whom Owed			ľ	TIOI AL	noum	0.00	
MALCOLM M. GLASGOW				tem or D	urpose fo	0.00	294.93 Outstanding Balance
Address			ľ				-
793 LINDENHAVEN ROAD	Ciara	7:- 0-1-	-	P	OSTA	GE	294.93
City		Zip Code				iyments N	dade This Period
GAHANNA	OH				Date		Amount
Date Debt was originally Incurred	M	D Y		M	D	Y	3
The second secon	0 9	0 2 1	5		-	.,	
Registration Number, if PAC			ļ	M	D	Y	ļ
				M	D	Y	
To Whom Owed			1	Prior Ar	nount		Amt, Incurred this Period
			,			5.1.	0.11 11 12 1
Address			ľ	tem or F	urpose fo	r Debt	Outstanding Balance
			ļ				
City	State	Zip Code				yments N	Made This Period
All to 11 to 11 miles were the same marketing for the same of the			.		Date	.,	Amount
Date Debt was originally Incurred	М	D Y	Y	М	D	Y	<b>&gt;</b>
and the second s					-		
Registration Number, if PAC			-	М	D	Y	
				M	D	Y	
₹							]

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made 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 \$

 $0.00 \quad \text{(also record on Form 31-B)}$ 

Total Outstanding Balance \$

339.93 (also record on cover page)