

Statement of Outstanding Debts

Prescribed by Secretar	ry of State	2/01					
Full Name of Committee							
Doucher for Judge							
To Whom Owed					nount		Amt. Incurred this Period
Kimberley A. Doucher			480.39			0.00	
Address			i l			Outstanding Balance	
6065 Frantz Rd, Suite 104			Camp. material 480.39				
City	State Zip Code					yments M	Ande This Period
Dublin	OH		3017		Date		Amount
Date Debt was originally Incurred	1 1	D	Y	M	D	Y	
Registration Number, if PAC	1 2	0	3 0 9	M	D	Y	
Registration Number, it PAC				IVI		'	
				M	D	Y	
				I			
To Whom Owed				Prior An	nount	1	Amt. Incurred this Period
Address				item or F	urpose fo	r Debt	Outstanding Balance
City	State	Zip C	ode	Payments Made This Period			
				Date			Amount
Date Debt was originally Incurred	M	Ď	Y	М	D	Y	s
				.			İ
Registration Number, if PAC				М	D	Y	
				М	D	Y	
To Whom Owed				Prior An	nount		Amt. Incurred this Period
Address				Hem or 1	urpose fo	r Debt	Outstanding Balance
	State	Ian c	- d-	<u> </u>			<u> </u>
City	State	ZipC	ode	Payments Made This Period Date Amount			
	 M	D	Y	М	Date	ΙΥ	k
Date Debt was originally Incurred	1 "			"		i	•
Registration Number, if PAC				M	D D	Y	
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				M	D	Y	
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If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all							
Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-	-1). Trans	fer tota	al outstandii	ng debt an	ount to t	he cover p	page.

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	•			period to the Statement of Expenditu	
Total Payments this Period \$		0.00 (also red	cord on Form 31-B)		
Total Outstanding Balance \$		480.39 (also re	cord on cover page)		