Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

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tal of	fall	paymer	its made	this per	od to th	e Staten	nent of Expenditures (Form
No. 3	1-J-	1). Trar	sfer tot	al outsta	nding de	btarmou	nt to the cover page.
d on	Fori	n 31-B))				
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	Stall M	State State M intal of all No. 31-J-	State Zip Cod M D Otal of all payments No. 31-J-1). Trans	State Zip Code M D Y otal of all payments made	State Zip Code M	State Zip Code Pa Date M D M D M D M D Prior Amount M D Prior Amount Item or Purpose State Zip Code Pa Date M D M D M D Amount Item or Purpose State Zip Code Pa Date M D Amount Item or Purpose State Jay Code Pa Date Amount Item or Purpose State Jay Code Pa Date Date Amount Item or Purpose Otal of all payments made this period to the No. 31-J-1). Transfer total outstanding de	Prior Amount State Zip Code Payments Date M