31-N
R.C. 3517.10

Page _____

Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee									
People for Cope									

To Whom Owed				Prior Amount		Amt. Incurred this Period			
Michael Cope				40.00		0.00			

Address				Item or Purpose for Debt	Outstanding Balance				
4549 Dirham Ln.				Printing	40.00				

City	State	Zip Code	**Payments Made This Period**						
Hilliard	O H	43026	Date			Amount			

Date Debt was originally Incurred	M	D	Y	M	D	Y	$
	0 9	1 0	0 7				

Registration Number, if PAC	M	D	Y	
	M	D	Y	

To Whom Owed				Prior Amount		Amt. Incurred this Period			
Michael Cope				5,555.29		0.00			

Address				Item or Purpose for Debt	Outstanding Balance				
4549 Dirham Ln.				Postcards	5,555.29				

City	State	Zip Code	**Payments Made This Period**						
Hilliard	O H	43026	Date			Amount			

Date Debt was originally Incurred	M	D	Y	M	D	Y	$
	1 1	1 4	0 7				

Registration Number, if PAC	M	D	Y	
	M	D	Y	

To Whom Owed				Prior Amount		Amt. Incurred this Period			

Address				Item or Purpose for Debt	Outstanding Balance				

City	State	Zip Code	**Payments Made This Period**						
			Date			Amount			

Date Debt was originally Incurred	M	D	Y	M	D	Y	$

Registration Number, if PAC	M	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 _ (also record on Form 31-B)

Total Outstanding Balance $ _____ 5,595.29 _ (also record on cover page)