

Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

| | | | | | | | | | |
|---|--|--|--|-----------------------------|--|---|--|--|--|
| Full Name of Committee Elect Keegan | | | | | | | | | |
| To Whom Owed Julie Keegan - OSBA | | | | | | Prior Amount 60.00 | | Amt. Incurred this Period 0.00 | |
| Address 8050 N High St Ste 100 | | | | | | Item or Purpose for Debt | | Outstanding Balance 0.00 | |
| City Columbus | | | | State O H | | Zip Code 43235 | | Payments Made This Period Date Amount | |
| Date Debt was originally Incurred | | | | M D Y 0 7 2 7 0 7 | | M D Y 1 2 0 7 0 7 | | \$ 60.00 | |
| Registration Number, if PAC | | | | | | M D Y | | | |
| | | | | | | M D Y | | | |
| To Whom Owed Julie Keegan - Squier Photography | | | | | | Prior Amount 160.13 | | Amt. Incurred this Period 0.00 | |
| Address 6975 Mesquite Ct | | | | | | Item or Purpose for Debt Notes for Public | | Outstanding Balance 0.00 | |
| City Dublin | | | | State O H | | Zip Code 43017 | | Payments Made This Period Date Amount | |
| Date Debt was originally Incurred | | | | M D Y 0 8 0 2 0 7 | | M D Y 1 2 0 7 0 7 | | \$ 160.13 | |
| Registration Number, if PAC | | | | | | M D Y | | | |
| | | | | | | M D Y | | | |
| To Whom Owed Julie Keegan - Scharfenberger dba PC Signs.com | | | | | | Prior Amount 2,226.25 | | Amt. Incurred this Period 0.00 | |
| Address 2543 Commerce Blvd | | | | | | Item or Purpose for Debt | | Outstanding Balance 0.00 | |
| City Cincinnati | | | | State O H | | Zip Code 45241 | | Payments Made This Period Date Amount | |
| Date Debt was originally Incurred | | | | M D Y 0 9 2 6 0 7 | | M D Y 1 2 0 7 0 7 | | \$ 2,226.25 | |
| 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 \$ 2,446.38 (also record on Form 31-B)

Total Outstanding Balance \$ 0.00 (also record on cover page)