



## **Statement of Outstanding Debts**

Form 31-N R.C. 3517.10

Full Name of Committee							
CITIZENS TO RE-EL	ECT LEC	CKLIL	DER				
To Whom Owed					Prior Amount	-	nt Incurred this Period
TIM LECKLIDER					-6	¥ 2	,105.41
Street Address					Item or Purpose of Debt  See enclosed of 5		
6305 WORSHAM W	<b>4</b> 44		<del>,</del>		spreadsheet		3,105.41
City DUBLIN		State Zip Code OH 43014			Payments Received This Period		
	Date of	Original Loa	an (MM/DD/Y	YYY)	Date of Payment (MM/I	DD/YYYY)	Amount
Registration Number, if PAC			<u>.</u>		Date of Payment (MM/l	DD/YYYY)	Amount
					Date of Payment (MM/I	DD/YYYY)	Amount
To Whom Owed					Prior Amount	Amou	nt Incurred this Period
Street Address					Item or Purpose of Deb	ot Outst	anding Balance
State OH			Zip Code		Payments Received This Period		
Dat		Date of Original Loan (MM/DD/YYYY)		YYY)	Date of Payment (MM/DD/YYYY)		Amount
Registration Number, if PAC					Date of Payment (MM/l	DD/YYYY)	Amount
					Date of Payment (MM/l	DD/YYYY)	Amount
If a debt is forgiven, write "Forgiven" in the "Ou (Form No. 31-B). Total amount forgiven should cover page.							
Total Payments This Period \$				also record on Form 31-B)			
Total Outstanding Balance \$	-C-			also record on cover page)			