



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee DREES FOR UA SCHOOLS			
Full Name of Contributor NANCY DREES		Registration Number, if PAC	
Street Address 3781 CRISWELL DR	Type* Loan Payments Received	Date (MM/DD/YYYY) 08/26/2019	Form (Cash, Check, etc.) CREDIT CARD
City COLUMBUS	State OH	Zip Code 43220	Amount 400.00
Full Name of Contributor NANCY DREES		Registration Number, if PAC	
Street Address 3781 CRISWELL DR	Type* Loan Payments Received	Date (MM/DD/YYYY) 10/24/2019	Form (Cash, Check, etc.) CREDIT CARD
City COLUMBUS	State OH	Zip Code 43220	Amount 70.00
Full Name of Contributor NANCY DREES		Registration Number, if PAC	
Street Address 3781 CRISWELL DR	Type* Loan Payments Received	Date (MM/DD/YYYY) 10/31/2019	Form (Cash, Check, etc.) CREDIT CARD
City COLUMBUS	State OH	Zip Code 43220	Amount 171.30
Full Name of Contributor NANCY DREES		Registration Number, if PAC	
Street Address 3781 CRISWELL DR	Type* Loan Payments Received	Date (MM/DD/YYYY) 11/30/2019	Form (Cash, Check, etc.) CREDIT CARD
City COLUMBUS	State OH	Zip Code 43220	Amount 227.92
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount

* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

Page Total \$ 869.22