

# FOR PAPER FILING ONLY

## Statement of Other Income

Prescribed by Secretary of State 2/01

Page \_\_\_\_\_

Name of Committee in Full <b>Westerville Education Association PAC for Schools</b>				Registration Number, if PAC	
Full Name		Type*		M D Y Amount	
Address <b>519 S Otterbein Ave, Suite 8</b>		<b>IN</b>		<b>\$0.07</b>	
City <b>Westerville</b>		State <b>OH</b>		Zip Code <b>43081</b>	
Form (Cash, Check, etc.)					
Full Name				Registration Number, if PAC	
Address		Type*		M D Y Amount	
		<b>RE</b>			
City		State <b>OH</b>		Zip Code	
Form (Cash, Check, etc.)					
Full Name				Registration Number, if PAC	
Address		Type*		M D Y Amount	
		<b>RE</b>			
City		State <b>OH</b>		Zip Code	
Form (Cash, Check, etc.)					
Full Name				Registration Number, if PAC	
Address		Type*		M D Y Amount	
		<b>RE</b>			
City		State <b>OH</b>		Zip Code	
Form (Cash, Check, etc.)					
Full Name				Registration Number, if PAC	
Address		Type*		M D Y Amount	
		<b>RE</b>			
City		State <b>OH</b>		Zip Code	
Form (Cash, Check, etc.)					
Full Name				Registration Number, if PAC	
Address		Type*		M D Y Amount	
		<b>RE</b>			
City		State <b>OH</b>		Zip Code	
Form (Cash, Check, etc.)					
Full Name				Registration Number, if PAC	
Address		Type*		M D Y Amount	
		<b>RE</b>			
City		State <b>OH</b>		Zip Code	
Form (Cash, Check, etc.)					
Full Name				Registration Number, if PAC	
Address		Type*		M D Y Amount	
		<b>RE</b>			
City		State <b>OH</b>		Zip Code	
Form (Cash, Check, etc.)					

\* 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 \$ ~~0.00~~ **0.07**