31-A-2
R.C. 3517.10(B)

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Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full: Committee To Elect Jarvis

Full Name			Registration Number, if PAC	
Bruce A. Jarvis (Self)				
Address	**Type***		**M D Y**	**Amount**
42 E. Waterloo St.	LN		07 29 15	$10.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
Canal Winchester	OH	43110	Cash	

Full Name			Registration Number, if PAC	
Bruce A. Jarvis				
Address	**Type***		**M D Y**	**Amount**
42 E. Waterloo St.	LN		09 14 15	$800.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
Canal Winchester	OH	43110	Check	

Full Name			Registration Number, if PAC	
Address	**Type***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	

Full Name			Registration Number, if PAC	
Address	**Type***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	

Full Name			Registration Number, if PAC	
Address	**Type***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	

Full Name			Registration Number, if PAC	
Address	**Type***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	

Full Name			Registration Number, if PAC	
Address	**Type***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	

Full Name			Registration Number, if PAC	
Address	**Type***		**M D Y**	**Amount**
City	**State**	**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 $ 810.00