

# Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Citizens for Accountability and Results in Education</b>									
Full Name <b>First Bank of Bexley</b>					Registration Number, if PAC				
Address <b>2680 East Main St</b>		Type* <b>IN</b>				M <b>1</b>	D <b>2</b>	Y <b>3</b>	Amount <b>\$1.33</b>
City <b>Bexley, Oh 43209</b>		State <b>OH</b>		Zip Code <b>43209</b>		Form (Cash, Check, etc.) <b>Cash</b>			
Full Name					Registration Number, if PAC				
Address		Type* <b>RE</b>				M	D	Y	Amount
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)			
Full Name					Registration Number, if PAC				
Address		Type* <b>RE</b>				M	D	Y	Amount
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)			
Full Name					Registration Number, if PAC				
Address		Type* <b>RE</b>				M	D	Y	Amount
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)			
Full Name					Registration Number, if PAC				
Address		Type* <b>RE</b>				M	D	Y	Amount
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)			
Full Name					Registration Number, if PAC				
Address		Type* <b>RE</b>				M	D	Y	Amount
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)			
Full Name					Registration Number, if PAC				
Address		Type* <b>RE</b>				M	D	Y	Amount
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)			
Full Name					Registration Number, if PAC				
Address		Type* <b>RE</b>				M	D	Y	Amount
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 \$ **1.33**