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

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full: Citizens for Spalding

Full Name	Registration Number, if PAC	Address	Type*	M D Y	Amount	City	State	Zip Code	Form (Cash, Check, etc.)
Sloan T. Spalding		7567 King George Drive	~~RE~~ LN	10 16 09	$2,450.00	New Albany	OH	43054	cash
			RE				OH		
			RE				OH		
			RE				OH		
			RE				OH		
			RE				OH		
			RE				OH		
			RE				OH		

* 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 $ 2,450.00