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## **Statement of Other Income**

Prescribed by Secretary of State 2/01

Name of Committee in Full  Citizens for David DeCanua								
Citizens for David DeCapua				Registration Number, if PAC				
Full Name			Registrat	don ivumi	oer, ir PA	C		
Arlington Bank	ren de		<u></u>		X7	I A		
Address	Type*		м 0 1		1 0	Amount	0.53	
City	State	Zip Code		sh,Check				
Columbus	$O \mid H$	43221	baı	nk cre	edit			
Full Name			Registra	tion Num	ber, if PA	С		
Arlington Bank								
Address	Type*		м 0   2	D 1   5		Amount	0.48	
City	State	Zip Code		sh,Check				
Columbus	$O \mid H$	43221	bar	nk cre	edit			
Full Name			Registra	tion Num	ber, if PA	C		
Arlington Bank								
Address	Type*		M	D	Y	Amount	accommunication and a second an	
	r   N		0 3	1 5	1 0	00-p-	0.51	
City	State	Zip Code		sh,Check				
Columbus	$\cap \mid H$	43221	baı	nk cre	edit			
Full Name				Registration Number, if PAC				
Address	Type*		М	D	Y	Amount	<del>}</del>	
City	State	Zip Code	Form(Ca	sh,Check	,etc)			
			baı	nk cre				
Full Name				Registration Number, if PAC				
Address	Type*		M	D	Y	Amount		
Addicss	1 ypc		l Wi		,	I mount		
City	State	Zip Code	Form(Ca	sh Check	etc)			
City	Julia	Emp Code	Form(Cash,Check,etc) bank credit					
Full Name			Registration Number, if PAC					
Address	Туре*		M	D	Y	Amount		
	100							
City	State	Zip Code	Form(Ca	ish,Check	;,etc)			
Full Name				Registration Number, if PAC				
Address	Type*		М	D	Y	Amount	90- <del>2</del>	
					L Ļ			
City	State	Zip Code	Form(Ca	Form(Cash,Check,etc)				
Full Name				Registration Number, if PAC				
Address	Type*		M	D	Y	Amount		
City	State	Zip Code	Form(Cash,Check,etc)					
						1 1 (1		

SA for the sale of committee assets, or LN for payments received on a loan made.

<sup>\*</sup> 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, place the letters IN for any investment or interest income earned by the committee,