## **Statement of Other Income**

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Prescribed by Secretary of State 2/01

Name of Committee in Full				enggania militara pada.		Annual Indiana (Indiana)	
Citizens for Frank Ciotola			and the same of th	-	-	A.C.	
Full Name (NONE)			Registration Number, if PAC				
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Page Total \$

<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, 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.