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

## **Statement of Other Income**

	1
Page	<u> </u>

Prescribed by Secretary of State 2/01

Name of Committee in Full	<u> </u>	
Citizens for David DeCapua		In the second second
Full Name Arlington Bank		Registration Number, if PAC
Address 2130 Tremont Center	Type*	1 2 1 5 1 4 Amount \$0.75
City Upper Arlington	State Zip Code OH 43221	Form (Cash, Check, etc.) bank credit
Fuli Name	Registration Number, if PAC	
Arlington Bank		
Address 2130 Tremont Center	Type*	0 1 1 5 1 5 \$0.61
City	State Zip Code	Form (Cash, Check, etc.)
Upper Arlington	OH 43221	
Full Name Arlington Bank		Registration Number, if PAC
Address	Type*	M D Y Amount
2130 Tremont Center	RE _	0 2 1 3 1 5 \$0.58
City Upper Arlington	State Zip Code OH 43221	Form (Cash, Check, etc.)
I'ull Name		Registration Number, if PAC
Arlington Bank	Tona*	M D Y Amount
2130 Tremont Center	Type*  RE	0 3 1 3 1 5 \$0.56
City	State Zip Code	Form (Cash, Check, etc.)
Upper Arlington Full Name	OH 43221	Registration Number, if PAC
Arlington Bank	·	
Address 2130 Tramont Center	Type*	M D Y Amount
2130 Tremont Center	RE Zip Code	0 4 1 5 1 5 \$0.65
Upper Arlington	OH 43221	Total (Casa, Cheva, Ca.)
Full Name	1. 7 1.3-2	Registration Number, if PAC
Address	Type*	M D Y Amount
City	RE Zip Code	Form (Cash, Check, etc.)
	OH Zip Code	
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	State Zip Code	Form (Cash, Check, etc.)
Full Name	OH	Registration Number, if PAC
Address	Type*	M D Y Amount
	RE	
City	State Zip Code OH	Form (Cash, Check, etc.)

3.15

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, uneashed 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.