Statement of Other Income

	1	
Page	<u> </u>	

Prescribed by Secretary of State 2/01

Name of Committee in Full		<u> </u>	
Central Ohio Realtors Political Action Committee			
Full Name PNC Bank		 -	Registration Number, if PAC
Address P.O. Box 609	Type*		M D Y Amount 0 4 3 0 1 5 \$0.02
City Pittsburgh	State PA	Zip Code 15230	Form (Cash, Check, etc.)
Full Name	Registration Number, if PAC		
PNC Bank			
Address	Type*		M D Y Amount
P.O. Box 609 City	<u> IN</u> _		0 5 3 1 1 5 \$0.01
Pittsburgh	Stație DA	Zip Code	Form (Cash, Check, etc.)
Full Name	PA	15230	Paris North CRAC
			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State -	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name			Registration Number, if PAC
Address	Type*	4	M D Y Amount
	RE _		
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name	Registration Number, if PAC		
Address	Type*		M D Y Amount
	RE		
City	Stante	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name	Registration Number, if PAC		
Address	Type*		M D Y Amount
	RE _		
City	State	Zip Code	Form (Cash, Check, etc.)
Full Name	ОН		Registration Number, if PAC
-rui Name			Registration Number, it PAC
Address	Type*		M D Y Amount
	l RÉ		
City	State	Zip Code	Form (Cash, Check, etc.)
	LOH .		
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	OH	<u> </u>	

0.03

Page Total \$

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.