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

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full: Reynoldsburg Area Democrats PAC

Full Name	Address	City	Type*	State	Zip Code	Registration Number, if PAC	M	D	Y	Amount	Form(Cash,Check,etc)
Citizens for Baker	5990 E Livingston Ave	Columbus	RE	OH	43232		09	25	17	146.67	Credit Card
Friends of Joe Begeny	4100 Regent St, Ste A	Columbus	RE	OH	43219		10	03	17	36.73	Check
Friends of Kristin Bryant	4100 Regent St, Ste A	Columbus	RE	OH	43219		10	03	17	36.73	Check

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

Page Total $ 220.13