Statement of Other Income

Page _____

Prescribed by Secretary of State 2/01

| Name of committee in Full | | | |
|-------------------------------|----------|---------------------------------------|-----------------------------|
| Full Name W (I) A Liall A Sen | Dies | > | Registration Number, if PAC |
| Address 940 6 Conford Ct | Loan | | 042313 137456 |
| 'Round's Dura | State | 2ip Code 3068 | Form (Cashe Check, etc.) |
| Full Name | | , (• 0 2 | Registration Number of PAC |
| Address | Type* | | M D Y Amount |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Full Name | :- | · | Registration Number, if PAC |
| Address | Type* | | M D Y Amount |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Full Name | | | Registration Number, if PAC |
| Address | Туре* | | , M D Y Amount |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Full Name | | · · · · · · · · · · · · · · · · · · · | Registration Number, if PAC |
| Address | Type* | | M D Y Amount |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Full Name | | <u></u> | Registration Number, if PAC |
| Address | Туре* | | M D Y Amount |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Full Name | <u> </u> | | Registration Number, if PAC |
| Address | Type* | | M D Y Amount |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Full Name | | | Registration Number, if PAC |
| Address | Type* | | M D Y Amount |
| City | State | Zip Code | Form (Cash, Check, etc.) |

Page Total \$ 1374,56

^{*} 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.