

Statement of Other Income

Prescribed by Secretary of State 2/01

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|--|--|-----------------------|--------------------------|-------------------------------------|---------------|---------------|-----------------------|
| Name of Committee in Full The Committee to Elect Eddie Pauline | | | | | | | |
| Full Name Bank One | | | | Registration Number, if PAC | | | |
| Address 100 E. Broad St. | | Type* I N | | M 0 | D 6 | Y 0 | Amount 3.65 |
| City Columbus | | State O H | Zip Code 43215 | Form(Cash,Check,etc) cash | | | |
| Full Name PayPal | | | | Registration Number, if PAC | | | |
| Address 211 N. First Street | | Type* I N | | M 0 | D 6 | Y 0 | Amount 0.49 |
| City San Jose | | State C A | Zip Code 95131 | Form(Cash,Check,etc) cash | | | |
| 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 | | 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 | | 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) | | | |

* 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.