Statement of Other Income

Page 1

Prescribed by Secretary of State 2/01

Name of Committee in Full		, .	
Citizens to Re-Elect Edward Dildine			
Full Name			Registration Number, if PAC
Edward Dildine			
Address	Type*		M D Y Amount
4495 Katherine Drive	LN .		0 5 0 8 1 3 2000.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43232	ck
Full Name	•		Registration Number, if PAC
Edward Dildine Address	T +:		
4495 Katherine drive	Type*		M D Y Amount
City	LN State	Zip Code	0 6 2 1 1 3 1163.56
Columbus	OH 2rain	43232	Form (Cash, Check, etc.)
Full Name	1 011	43232	Ck Registration Number, if PAC
, and the second		-	Registration Number, it FAC
Address	Type*		M D Y Amount
	RE	<u> </u>	
City	State	Zip Code	Form (Cash, Check, etc.)
	OH.	 ,	
Full Name		<u> </u>	Registration Number, if PAC
			1
Address	Type		M D Y Amount
	RE		[
City	State	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.)
	OH		
Full Name			Registration Number, if PAC
* 11	T	•	
Address	Type*		M D Y Amount
City	RE State	Zip Code	Form (Cash, Check, etc.)
Lify	OH	Zip Cour	Form (Cash, Check, etc.)
Full Name	<u> </u>		Registration Number, if PAC
, .			Registration (various, 11 1750
Address	Type*		M D Yi Amount
,	RE		
City ·	State _	Zip Code	Form (Cash, Check, etc.)
	ОН]	,
Fuli Name		•	Registration Number, if PAC
Address	Type		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	ОН		

3163-56 0.00 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.