



# Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

<b>Full Name of Committee</b> Jill Reardon for Trustee			
<b>Full Name of Contributor</b> Capitol Promotions, Inc.		<b>Registration Number, if PAC</b>	
<b>Street Address</b> PO Box 231	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b> 10/26/2017	<b>Form (Cash, Check, etc.)</b> ACH Credit
<b>City</b> Glenside	<b>State</b> PA	<b>Zip Code</b> 19038	<b>Amount</b> \$160.00
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>

\* 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.