

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full Save Columbus PAC (CNA TDS for Columbus PAC + Tax for Jobs PAC)				Registration Number, if PAC			
Full Name PNC BANK				Registration Number, if PAC			
Address Schrock/Otterbein corner		Type* RE		M 02	D 28	Y 17	Amount \$34.00
City Westerville		State OH	Zip Code 43081	Form (Cash, Check, etc.) bank charges			
Full Name Elicia Finnell (personal loan)				Registration Number, if PAC			
Address 293 Crosslake Court		Type* LN		M 04	D 18	Y 17	Amount 1,500.00
City Westerville		State OH	Zip Code 43081	Form (Cash, Check, etc.) check			
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.)			
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, 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.