

Statement of Other Income

Prescribed by Secretary of State 2/01

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Name of Committee in Full <i>Van Gregg Committee to Elect</i>				
Full Name <i>Loan Transfer Form 31c</i>			Registration Number, if PAC	
Address	Type* RE		M	D
City	State OH	Zip Code	Y	Amount <i>650.00</i>
Form (Cash, Check, etc.)				
Full Name				
Address			Type* RE	
City	State OH	Zip Code	M	D
Form (Cash, Check, etc.)			Y	Amount
Full Name				
Address			Type* RE	
City	State OH	Zip Code	M	D
Form (Cash, Check, etc.)			Y	Amount
Full Name				
Address			Type* RE	
City	State OH	Zip Code	M	D
Form (Cash, Check, etc.)			Y	Amount
Full Name				
Address			Type* RE	
City	State OH	Zip Code	M	D
Form (Cash, Check, etc.)			Y	Amount
Full Name				
Address			Type* RE	
City	State OH	Zip Code	M	D
Form (Cash, Check, etc.)			Y	Amount
Full Name				
Address			Type* RE	
City	State OH	Zip Code	M	D
Form (Cash, Check, etc.)			Y	Amount
Full Name				
Address			Type* RE	
City	State OH	Zip Code	M	D
Form (Cash, Check, etc.)			Y	Amount
Full Name				
Address			Type* RE	
City	State OH	Zip Code	M	D
Form (Cash, Check, etc.)			Y	Amount

* 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.

Page Total \$ *650.00*