Page	

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full				
Wilms for Westerville Schools				
Full Name		Registration Number, if PAC		
Peter G Wilms				
Address	Type*		M D Y Amount	
184 Baranof East	LM I		0 8 0 4 1 1 3,000.00	
City	State	Zip Code	Form(Cash,Check,etc)	
Westerville	ОН. [43081	check	
Full Name			Registration Number, if PAC	
Address	Type*		M D Y Amount	
City	State	Zip Code	Form(Cash,Check,etc)	
		1		
Full Name			Registration Number, if PAC	
Address	Type*		M D Y Amount	
	.,,,,			
City	State	Zip Code	Form(Cash,Check,etc)	
	1			
Gull Name			Registration Number, if PAC	
Full Name		1		
Addrage	Type*		M D Y Amount	
Address	i ype:			
Co.	State	Zip Code	Form(Cash,Check,etc)	
City	State	Lip Code	· or my committee or other party	
		<u></u>	Registration Number, if PAC	
Full Name			negistration number, in and	
			M D Y Amount	
Address	Type*		M D Y Amount	
		2: 6:	Francisco Christian	
City	State	Zip Code	Form(Cash,Check,etc)	
			D. Sandar M. Walter of PAC	
Full Name		Registration Number, if PAC		
		i		
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		
1				
Address	Type*		M D Y Amount	
1				
City	State	Zip Code	Form(Cash,Check,etc)	
1				

* 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.

Page Total \$ __3.000.00