

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full Kusma for Kids								
Full Name Michele Kusma				Registration Number, if PAC				
Address 2765 Brentwood Rd		Type* L N			M 1	D 0	Y 3	Amount 87.30
City Bexley		State O H	Zip Code 43209		Form(Cash,Check,etc) Cash			
Full Name Michele Kusma				Registration Number, if PAC				
Address 2765 Brentwood Rd		Type* L N			M 1	D 0	Y 3	Amount 129.38
City Bexley		State O H	Zip Code 43209		Form(Cash,Check,etc) Cash			
Full Name Michele Kusma				Registration Number, if PAC				
Address 2765 Brentwood Rd		Type* L N			M 1	D 0	Y 2	Amount 86.85
City Bexley		State O H	Zip Code 43209		Form(Cash,Check,etc) Cash			
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, 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.