



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

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Full Name of Committee				
Gary Tyack for Prosecutor				
Full Name of Contributor			Registration Number, if PAC	
Loan transfer from Form no. 31-C				·
Street Address	Type*	Date (MM/D	L D/YYYY)	Form (Cash, Check, etc.)
	Loan Payments Received		12/18/2019	Check
City	State	Zip Code		Amount
	ОН			\$1,000
Full Name of Contributor			Registration Number, if PAC	
Street Address	Type*	Date (MM/D	D/YYYY)	Form (Cash, Check, etc.)
	Refund			
City	State	Zip Code		Amount
•	ОН			
Full Name of Contributor	Annual Company and the property former and the second	an and and Annual La	Registration Number	er, if PAC
Street Address	Type*	Date (MM/D	D/YYYY)	Form (Cash, Check, etc.)
	Refund			
City	State	Zip Code		Amount
	ОН			
Full Name of Contributor			Registration Number, if PAC	
Street Address	Type*	Date (MM/D	D/YYYY)	Form (Cash, Check, etc.)
·	Refund		:	
City	State	Zip Code		Amount
	ОН			
Full Name of Contributor	manufacture and the same		Registration Number, if PAC	
			·	
Street Address	Type*	Date (MM/D)	D/YYYY)	Form (Cash, Check, etc.)
	Refund			
City	State	Zip Code Amount		Amount
	ОН			
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Page Total [,] \$	1,000	

^{*} 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.