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R.	C.	351	7.	100	B

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Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full								
Dingus For Judge					D. Janesian N. Janesis BAC			
Full Name Loans Received - from Statement of Loans Received					Registration Number, if PAC			
Address	Type*	1	M	D	Y	Amount		
Audios				1 1		2,833.32		
City	State	Zip Code	Form(C	ash,Check,	etc)			
Full Name			Registra	ation Numb	er, if PA	c		
Address	Type*		М	D	Y	Amount		
City	State	Zip Code	Form(C	ash,Check,	etc)			
Full Name	Registra	Registration Number, if PAC						
Address	Type*		М	D	Y	Amount		
			1					
City	State	Zip Code	Form(C	ash,Check,	etc)			
Full Name			Registra	ation Numb	er, if PA	.C		
Address	Type*		M	D	Y	Amount		
City	State	Zip Code	Form(C	ash,Check,	etc)			
Full Name				Registration Number, if PAC				
Address	Type*		М	D	Y	Amount		
, 144.555	''							
City	State	Zip Code	Form(C	ash,Check,	etc)			
Full Name	Registra	Registration Number, if PAC						
Address	Type*		М	D	Y	Amount		
City	State	Zip Code	Form(C	ash,Check,	etc)			
Full Name				Registration Number, if PAC				
Address	Type*		М	D	Y	Amount		
				1 1 1				
City	State	Zip Code	Form(C	Form(Cash,Check,etc)				
Full Name			Registra	Registration Number, if PAC				
						· · · · · · · · · · · · · · · · · · ·		
Address	Type*		M 	D	Y	Amount		
City	State	Zip Code	Form(C	ash,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,