31-A-2
R.C. 3517.10(B)

Page ______

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full: O'Shaughnessy Committee

Full Name	Registration Number, if PAC	Address	Type*	M	D	Y	Amount	City	State	Zip Code	Form(Cash,Check,etc)
Chase Bank		P.O. Box 659754	IN	10	31	16	0.01	San Antonio	TX	78265	eft
Chase Bank		P.O. Box 659754	IN	11	30	16	0.01	San Antonio	TX	78265	eft

* 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 $ 0.02