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## **Statement of Other Income**

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Prescribed by Secretary of State 2/01

Name of Committee in Full		
Committee for Judge O'Donnell		
Full Name		Registration Number, if PAC
Executive Mailing Solutions, LLC	Th	
Address 2651 Johnstown Rd.	Type*  RE	1 1 0 3 1 4 Amount \$1,714.03
City Columbus	State Zip Code OH 43219	Form (Cash, Check, etc.)
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	State Zip Code	
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)

1,714.03

<sup>\*</sup> 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.