

**Statement of Other Income**

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Uhrin for GC Council</b>										
Full Name <b>Loan transfer from form no. 31-C</b>						Registration Number, if PAC				
Address			Type* <b>LN</b>				M	D	Y	Amount
			State <b>OH</b>		Zip Code		<b>1</b>	<b>0</b>	<b>1</b>	<b>\$9,000.00</b>
City							Form (Cash, Check, etc.)			
Full Name						Registration Number, if PAC				
Address			Type* <b>RE</b>				M	D	Y	Amount
			State <b>OH</b>		Zip Code					
City							Form (Cash, Check, etc.)			
Full Name						Registration Number, if PAC				
Address			Type* <b>RE</b>				M	D	Y	Amount
			State <b>OH</b>		Zip Code					
City							Form (Cash, Check, etc.)			
Full Name						Registration Number, if PAC				
Address			Type* <b>RE</b>				M	D	Y	Amount
			State <b>OH</b>		Zip Code					
City							Form (Cash, Check, etc.)			
Full Name						Registration Number, if PAC				
Address			Type* <b>RE</b>				M	D	Y	Amount
			State <b>OH</b>		Zip Code					
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City							Form (Cash, Check, etc.)			
Full Name						Registration Number, if PAC				
Address			Type* <b>RE</b>				M	D	Y	Amount
			State <b>OH</b>		Zip Code					
City							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, 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.

**9,000.00**

Page Total \$