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

## **Statement of Other Income**

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Page		

Prescribed by Secretary of State 2/01

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Name of Committee in Full	O-b1-		<del></del>
Westerville Education Association PAC f	or Schools		
Full Name			Registration Number, if PAC
A17	·		
Address	Type*		M D Y Amount
519 S. Otterbein Avenue, Suite 8	IN		\$0.06
City	State	Zip Code	Form (Cash, Check, etc.)
Westerville	OH	43081	
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Address	Type*		Me D Y Amount
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City	State	Zip Code	Form (Cash, Check, etc.)
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Full Name	1 0	1 .	Registration Number, if PAC
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Full Name	1 0.1		Registration Number, if PAC
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Full Name	LOH		Registration Number, if PAC
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Address	Type*		M D Y Amount
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City	Stagle -	Zip Code	Form (Cash, Check, etc.)
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<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.