

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full David Young for Judge Committee							
Full Name Paypal				Registration Number, if PAC			
Address 1840 Embarcadero Road	Type* R E		M 0 3	D 0 7	Y 1 1	Amount 0.10	
City Palo Alto	State C A	Zip Code 94303	Form(Cash,Check,etc) EFT				
Full Name Paypal				Registration Number, if PAC			
Address 1840 Embarcadero Road	Type* R E		M 0 3	D 0 7	Y 1 1	Amount 0.02	
City Palo Alto	State C A	Zip Code 94303	Form(Cash,Check,etc) EFT				
Full Name Lowes				Registration Number, if PAC			
Address 6555 Dublin Center Drive	Type* R E		M 0 7	D 1 1	Y 1 1	Amount 27.68	
City Dublin	State O H	Zip Code 43017	Form(Cash,Check,etc) DC				
Full Name				Registration Number, if PAC			
Address	Type*		M	D	Y	Amount	
City	State	Zip Code	Form(Cash,Check,etc)				
Full Name				Registration Number, if PAC			
Address	Type*		M	D	Y	Amount	
City	State	Zip Code	Form(Cash,Check,etc)				
Full Name				Registration Number, if PAC			
Address	Type*		M	D	Y	Amount	
City	State	Zip Code	Form(Cash,Check,etc)				
Full Name				Registration Number, if PAC			
Address	Type*		M	D	Y	Amount	
City	State	Zip Code	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, 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.