## **Statement of Other Income**

Page \_\_\_\_

Prescribed by Secretary of State 2/01

Name of Committee in Full		
Citzens For Aaron DeLong		
Full Name		Registration Number, if PAC
Loans from 31-C		
Address	Type*	M D Y Amount
	RE	\$403.79
City	State Zip Code	Form (Cash, Check, etc.)
	OH	Various
Full Name		Registration Number, if PAC
	. <u> </u>	
Address	Type*	M D Y Amount
	RE	
City	State Zip Code	Form (Cash, Check, etc.)
	OH	
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
	RE	
City	State Zip Code	Form (Cash, Check, etc.)
E UNI	OH	
Full Name	-	Registration Number, if PAC
Address		
Address	Туре*	M D Y Amount
City	RE	
City	State Zip Code	Form (Cash, Check, etc.)
Full Name	OH	Daries V. J. 1991
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
	•	M D Y Amount
City	RE State Zip Code	Form (Cash, Check, etc.)
	OH Zip Code	- Sim (Calon, Citota, etc.)
Full Name	V:1	Registration Number, if PAC
Address	Type*	M D Y Amount
	RE	
City	Stale Zip Code	Form (Cash, Check, etc.)
	ОН	
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
	RE	
City	State Zip Code	Form (Cash, Check, etc.)
	OH	
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
o.	RE	
City	State Zip Code	Form (Cash, Check, etc.)
	OH	

403.79

Page Total \$

<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.