



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee							
Full Name of Committee Westerville Education Association PAC for Schools							
Westerville Educat	ion Assoc	ciatio	on tac	for Schools			
Full Name of Contributor			Registration Numb	er, if PAC			
Street Address	T.m.at	T=		[F (Ot- Obtt)			
	Type*	Date (MM/D	D/YYYY)	Form (Cash, Check, etc.)			
519 S. Otterbein Ave. Ste8	Interest						
City	State	Zip Code		Amount			
519 S. Otterbein Ave. Ste8 City Westerville	он	43	081	0.06			
Full Name of Contributor			Registration Number, if PAC				
Street Address	Type*	Date (MM/D	D/YYYY)	Form (Cash, Check, etc.)			
	Refund		,	(* , * , * , * , * , * , * , * , * , * ,			
City	State	Zip Code		Amount			
	ОН						
Full Name of Contributor		Registration Number		er, if PAC			
Street Address	Type*	Date (MM/D	D~~~\	Form (Cash, Check, etc.)			
Oliber Address	Refund	Date (MINI/D	D/1111)	Tom (oash, oneok, etc.)			
	Reigha						
City	State	Zip Code		Amount			
	он	}					
Full Name of Contributor			Registration Number, if PAC				
Street Address	Type*	D-4- (MAM/D)	D20000	Form (Cash, Check, etc.)			
Silver Address		Date (MM/D	0/1111)	Form (Cash, Check, etc.)			
	Refund						
City	State	Zip Code		Amount			
	он	}					
Full Name of Contributor		·	Registration Number, if PAC				
Street Address	Type*	Date (MM/D	D/YYYY)	Form (Cash, Check, etc.)			
	Refund	22.2 (
City	State	Zip Code Amount		Amount			
	ОН						
							

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^{*} 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.