

# Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Citizens for Mingo</b>					
Full Name <b>The Apple Store</b>			Registration Number, if PAC		
Address <b>4070 The Strand E</b>	Type* <b>RE</b>		M <b>0</b>	D <b>8</b>	Y <b>1312</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43218</b>	Form (Cash, Check, etc.) <b>EFT</b>		
Amount <b>\$564.71</b>					
Full Name					
Address			Registration Number, if PAC		
Type* <b>RE</b>			M	D	Y
State <b>OH</b>			Amount		
City			Form (Cash, Check, etc.)		
Zip Code					
Amount					
Full Name					
Address			Registration Number, if PAC		
Type* <b>RE</b>			M	D	Y
State <b>OH</b>			Amount		
City			Form (Cash, Check, etc.)		
Zip Code					
Amount					
Full Name					
Address			Registration Number, if PAC		
Type* <b>RE</b>			M	D	Y
State <b>OH</b>			Amount		
City			Form (Cash, Check, etc.)		
Zip Code					
Amount					
Full Name					
Address			Registration Number, if PAC		
Type* <b>RE</b>			M	D	Y
State <b>OH</b>			Amount		
City			Form (Cash, Check, etc.)		
Zip Code					
Amount					
Full Name					
Address			Registration Number, if PAC		
Type* <b>RE</b>			M	D	Y
State <b>OH</b>			Amount		
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Full Name					
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Type* <b>RE</b>			M	D	Y
State <b>OH</b>			Amount		
City			Form (Cash, Check, etc.)		
Zip Code					
Amount					
Full Name					
Address			Registration Number, if PAC		
Type* <b>RE</b>			M	D	Y
State <b>OH</b>			Amount		
City			Form (Cash, Check, etc.)		
Zip Code					
Amount					
Full Name					
Address			Registration Number, if PAC		
Type* <b>RE</b>			M	D	Y
State <b>OH</b>			Amount		
City			Form (Cash, Check, etc.)		
Zip Code					
Amount					

\* 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.

Page Total \$ **564.71**