Statement of Other Income



Prescribed by Secretary of State 2/01

Name of Committee in Full			
Friends of Dennis Nicodemus			
Full Name			Registration Number, if PAC
Powerco Credit Union			
Address	Type*		M D Y Amount
471 Morrison Rd., Suite M	_IN		0 3 3 1 0 9 \$0.38
City	State	Zip Code	Form (Cash, Check, etc.)
Gahanna	ОН	43230	Cash Registration Number if BAC
Full Name			Registration Number, if PAC
Powerco Credit Union	T *		M D Y Amount
Address A71 Morrison Pd Suite M	Type*		0 6 3 0 0 9 \$0.39
471 Morrison Rd., Suite M	State	Zip Code	Form (Cash, Check, etc.)
City Gahanna	OH	43230	cash
Gananna Full Name			Registration Number, if PAC
Powerco Credit Union			
Address	Type*		M D Y Amount
471 Morrison Rd., Suite M	IN		0 9 3 0 0 9 \$1.45
City	State	Zip Code	Form (Cash, Check, etc.)
Gahanna	ОН	43230	cash
Full Name			Registration Number, if PAC

Address	Type*		M D Y Amount
	RE _	7:-0-1	Fam (Cook Charles and
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		Registration Number, if PAC
Full Name			Together Carrier of the Carrier of t
Address	Type*		M D Y Amount
. 101.000	RE		
City	State	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		Device Name - 1004 C
Full Name			Registration Number, if PAC
	Tr.3 *		M D Y Amount
Address	Type*		Amount
City.	RE _	Zip Code	Form (Cash, Check, etc.)
City		Lap Cour	
Full Name	L OH		Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		
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2.22

Page Total \$

^{*} 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.