31-A-2
R.C. 3517.10(B)

Statement of Other Income

Page 2

Prescribed by Secretary of State 2/01

Name of Committee in Full		<u> </u>	
Westerville Education Association PAC t	for Schools		
Full Name			Registration Number, if PAC
Address	Type•		
519 S. Otterbein Avenue, Suite 8	IN		M9 D Y Amount S0.15
City	State	Zip Code	Form (Cash, Check, etc.)
Westerville	OH	43081	
Full Name			Registration Number, if PAC
Address	Type*		
	RE		M D Y Amount
City	State	Zip Code	Form (Cash, Check, etc.)
	l OH		
Full Name			Registration Number, if PAC
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City	State	Zip Code	Form (Cash, Check, etc.)
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Full Name			Registration Number, if PAC
Address	This		
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City	State	Zip Code	Form (Cash, Check, etc.)
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Full Name			Registration Number, if PAC
Address	Type*	····	
	RE		M D Y Amount
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Fuli Name			Registration Number, if PAC
Address	Type*		VG D V Danier
	RE		M D Y Amount
City	State	Zip Code	Form (Cash, Check, etc.)
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Full Name			Registration Number, if PAC
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	RE		M D Yî Amount
City	State	Zip Code	Form (Cash, Check, etc.)
	ОН		
ull Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	ОН		

0.15

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.