Statement of Other Income

Prescribed by Secretary of State 2011

Name of Committee in Full							
Motil for City Council Registration Number if PAC							
u source			Registr	Registration Number, if PAC			
Address	Type*		M	D	Y	Amount	
City	State	Zip Code	Form (6	Cash, Che	eck, etc.)	4.	
full Name			Registration Number, it PAC				
Address	Type* RE	Secretary Secret	M	D	Y	Amount	
City	State OH	Zip Code	}	Cash. Che		, i - 2	
Full Name				Registration Number, if PAC			
Address	Type*	The state of the s	М	D	Y	Атновит	
City	State	Zip Code	Form (C	Cash. Che	ek, etc.)		
Name			Registr	Registration Number, if PAC			
Address	Type* RE	Wilder Bo.	71	D	7	Antount	
City	State OH	Zip Code	Form (C	Form (Cash, Check, etc.)			
Full Name	Name			Registration Number, if PAC			
Address	Type*	Chang in the	M	D	Y	Amount	
City	State OH	Zip Code	Førm (C	Form (Cash, Check, etc.)			
Full Name			Registr	Registration Number, if PAC			
Address	RE	40	M	D	Y	Amount	
City	State OH	Zip Code		Form (Cash, Check, etc.)			
Full Name				Registration Number, if PAC			
Address	Type*	5 30 The State of	М	D	Y	Amount	
City	State OH	Zip Code	Foun (Form (Cash, Check, etc.)			
Same			Registr	Registration Number, if PAC			
Address	Type* RE	Ser Constitution of the service of t		D	,	Amount	
City	State OH	Zip Code	Form (Cash. Che	eck, etc.)	1	

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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.