Statement of Other Income

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Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Larry Jenkins			
Full Name			Registration Number, if PAC
Larry C. Jenkins			in the state of th
Address	Type*		M D Y _i Amount
58 West College Avenue	LN		0 8 0 6 1 3 \$2,000.00
City	State	Zip Code	Form (Cash, Check, etc.)
Westerville	OH	43081	cash
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RÉ		- Landing Control Control
City	State	Zîp Code	Form (Cash, Check, etc.)
	OH		
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		The state of the s
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		- Company
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name	•		Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		The state of the s
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		transfering
City	State	Zip Code	Form (Cash, Check, etc.)
<u></u>	OH		

2,000.00

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.