31	-A	-2	
R.C	2, 35	17.1	0(B

Statement of Other Income

Page	1	
, age		

Prescribed by Secretary of State 2/01

Name of Committee in Full Westerville Education Association PAC	for Schools	
Full Name	Registration Number, if PAC	
Bank One		
Address P.O. Box 260180	Type•	1 2 3 1 0 3 Amount \$1.73
City Baton Rouge	State Zip Code LA 70826	Form (Cash, Check, etc.) Electronic (Interest)
Full Name		Registration Number, if PAC
Address	Type* RE	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)
Full Name		Registration Number, if PAC
	Trains	M D Y Amount
Address	Type* RE	
City	State Zip Code	Form (Cash, Check, etc.)
Full Name	ОН	Registration Number, if PAC
and there		
Address	Type*	M D Y Amount
Cin.	RE Zip Code	Form (Cash, Check, etc.)
City	OH Zip code	
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
Cin	RE Zip Code	Form (Cash, Check, etc.)
City	OH Lip cook	
Full Name		Registration Number, if PAC
Address	Type*	M D Y Amount
City	RE Zip Code	Form (Cash, Check, etc.)
	ОН	
Full Name		Registration Number, if PAC
Address	туре* RE	M D Y Amount
City	State Zip Code	Form (Cash, Check, etc.)
	ОН	Registration Number, if PAC
Full Name		
Address	Type* RE	M D Y Amount
City	State Zip Code	Form (Cash, Check, etc.)
	OH	

1.73

^{*} 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.