

FOR PAPER FILING ONLY

Statement of Other Income

Prescribed by Secretary of State 2-01

Name of Committee in Full Friends of Dennis Nicodemus					
Full Name Powerco Credit Union				Registration Number, if PAC	
Address 5665 N Hamilton Rd.		Type* IN		M 0	D 9
City Columbus		State OH	Zip Code 43230	Y 3	Amount \$45
Form (Cash, Check, etc.) cash					
Full Name					
Address				Registration Number, if PAC	
City		Type* RE		M	D
		State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address				Registration Number, if PAC	
City		Type* RE		M	D
		State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address				Registration Number, if PAC	
City		Type* RE		M	D
		State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address				Registration Number, if PAC	
City		Type* RE		M	D
		State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address				Registration Number, if PAC	
City		Type* RE		M	D
		State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address				Registration Number, if PAC	
City		Type* RE		M	D
		State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address				Registration Number, if PAC	
City		Type* RE		M	D
		State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)					

* 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.

\$45
Page Total \$