

FOR PAPER FILING ONLY

Statement of Other Income

Prescribed by Secretary of State 2/01

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Name of Committee in Full Stonewall Democrats of Central Ohio PAC							
Full Name Media Mazcla				Registration Number, if PAC			
Address PO Box 20577		Type* RE <input checked="" type="checkbox"/>		M D Y 0 5 1 3 1 1		Amount \$360.00	
City New York		State NY <input checked="" type="checkbox"/>		Zip Code 10009		Form (Cash, Check, etc.) Electronic	
Full Name				Registration Number, if PAC			
Address		Type* RE <input checked="" type="checkbox"/>		M D Y		Amount	
City		State OH <input checked="" type="checkbox"/>		Zip Code		Form (Cash, Check, etc.)	
Full Name				Registration Number, if PAC			
Address		Type* RE <input checked="" type="checkbox"/>		M D Y		Amount	
City		State OH <input checked="" type="checkbox"/>		Zip Code		Form (Cash, Check, etc.)	
Full Name				Registration Number, if PAC			
Address		Type* RE <input checked="" type="checkbox"/>		M D Y		Amount	
City		State OH <input checked="" type="checkbox"/>		Zip Code		Form (Cash, Check, etc.)	
Full Name				Registration Number, if PAC			
Address		Type* RE <input checked="" type="checkbox"/>		M D Y		Amount	
City		State OH <input checked="" type="checkbox"/>		Zip Code		Form (Cash, Check, etc.)	
Full Name				Registration Number, if PAC			
Address		Type* RE <input checked="" type="checkbox"/>		M D Y		Amount	
City		State OH <input checked="" type="checkbox"/>		Zip Code		Form (Cash, Check, etc.)	
Full Name				Registration Number, if PAC			
Address		Type* RE <input checked="" type="checkbox"/>		M D Y		Amount	
City		State OH <input checked="" type="checkbox"/>		Zip Code		Form (Cash, Check, etc.)	
Full Name				Registration Number, if PAC			
Address		Type* RE <input checked="" type="checkbox"/>		M D Y		Amount	
City		State OH <input checked="" type="checkbox"/>		Zip Code		Form (Cash, Check, etc.)	
Full Name				Registration Number, if PAC			
Address		Type* RE <input checked="" type="checkbox"/>		M D Y		Amount	
City		State OH <input checked="" type="checkbox"/>		Zip Code		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.

360.00
Page Total \$