

## Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

FRIENDS OF JOHE CERN			Designation Number if PAC	
Il Name of Contributor			Registration Number, if PAC	
JANE CERA				
at Addross	Type*	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)	
12/0E COOKE RD COLUMBUS	Florium LOAN	9/03/10 Zip Code	ELECTRONIC	
1910 WOLL !	State	Zip Code	Amount 50.	
Calumpu	он	43224	150	
COLUITIO		Registration N	umber, if PAC	
Name of Contributor				
KRO6LR	Type*	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)	
et Address	Refund	1 '	FIMIRINIC	
199 GRACELAND	State	10 - 04- 19 Zip Code	Amount	
199 GRACELAND COLUMBUS	OH	43214	ELECTRUMC Amount 49.98	
COLUMBUS	Oil		lumber, if PAC	
Name of Contributor		Registration P	juniosi, a i 710	
			Te (One) Object etc.)	
eet Address	Type*	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)	
1001,1001	Refund			
ity	State	Zip Code	Amount	
	он			
		Registration	Number, if PAC	
Name of Contributor				
	Type*	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)	
Street Address	Refund			
	State	Zip Code	Amount	
ty	OH	<b>,</b>		
	OIT .	Registration	Number, if PAC	
all Name of Contributor				
			Form (Cash, Check, etc.)	
Street Address	Type*	Date (MM/DD/YYYY)	Tom (Sasiny Street, St	
	Refund		Amount	
City	State	Zip Code	Amount	

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Page Total \$_	99.98
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<sup>\*</sup> 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.