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Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

E. II November 11				`
Full Name of Committee				
Full Name of Contributor			Registration N	umber, if PAC
Columbias Metropolitan acon	lit (Perma)			
Street Address	Type*	Date (MM/DI	D/YYYY)	Form (Cash, Check, etc.)
Columbies Metropolitan Crea Street Address 4000 K. Broad Street	Refund	01-16		Form (Cash, Check, etc.) Interest Deposit
City	State	Zip Code	~ 10	Amount
Colambus	он	4321	3	0.18
Full Name of Contributor			Registration N	
Street Address	Type*	Date (MM/DI	DYYYY)	Form (Cash, Check, etc.)
	Refund			,
City	State	Zip Code		Amount
	он			
Full Name of Contributor			Registration N	umber, if PAC
		}	İ	
Street Address	Type*	Date (MM/DI	DYYYY)	Form (Cash, Check, etc.)
	Refund	l		
City	State	Zip Code		Amount
	ОН			
Full Name of Contributor			Registration N	umber, if PAC
Street Address	Type*	Date (MM/DI	O/YYYY)	Form (Cash, Check, etc.)
	Refund			
City	State	Zip Code		Amount
	ОН			
Full Name of Contributor			Registration N	umber, if PAC
Street Address	Type*	Date (MM/DI	OMYYY)	Form (Cash, Check, etc.)
	Refund			
City	State	Zip Code		Amount
	он			
L				

Page Total \$ \(\frac{1}{2} \), \(\frac{1}{2} \)
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^{*} 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.