



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

|  |  |                                      |  |
|--|--|--------------------------------------|--|
| Full Name of Committee<br><b>Citizens For Robinette</b>                |  |                                      |  |
| Full Name of Contributor<br><b>Grove City Football Supporters Club</b> |  | Registration Number, if PAC          |  |
| Street Address<br><b>PO Box 575</b>                                    | Type*<br><b>Refund</b> <del>Refund</del> | Date (MM/DD/YYYY)<br><b>09/15/19</b> | Form (Cash, Check, etc.)<br><b>check</b> |
| City<br><b>Grove City</b>  | State<br><b>OH</b>                       | Zip Code<br><b>43123</b>             | Amount<br><b>\$ 350.00</b>               |
| Full Name of Contributor   |  | Registration Number, if PAC          |  |
| Street Address   | Type*<br>Refund                          | Date (MM/DD/YYYY)                    | Form (Cash, Check, etc.)                 |
| City   | State<br>OH                              | Zip Code                             | Amount                                   |
| Full Name of Contributor   |  | Registration Number, if PAC          |  |
| Street Address   | Type*<br>Refund                          | Date (MM/DD/YYYY)                    | Form (Cash, Check, etc.)                 |
| City   | State<br>OH                              | Zip Code                             | Amount                                   |
| Full Name of Contributor   |  | Registration Number, if PAC          |  |
| Street Address   | Type*<br>Refund                          | Date (MM/DD/YYYY)                    | Form (Cash, Check, etc.)                 |
| City   | State<br>OH                              | Zip Code                             | Amount                                   |
| Full Name of Contributor   |  | Registration Number, if PAC          |  |
| Street Address   | Type*<br>Refund                          | Date (MM/DD/YYYY)                    | Form (Cash, Check, etc.)                 |
| City   | State<br>OH                              | Zip Code                             | Amount                                   |

\* 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.

Page Total \$ **\$ 350.00**