

# Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee for Crysta Pennington</b>					
Full Name <b>Carla Morrow</b>			Registration Number, if PAC		
Address <b>4631 Sylvan Oak Drive</b>		Type* <b>LN</b> <input checked="" type="checkbox"/>	M <b>1</b>	D <b>0</b>	Y <b>1 5 1 6</b>
City <b>Trotwood</b>		State <b>OH</b>	Zip Code <b>45426</b>		Amount <b>\$3,300.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name <b>Crysta Pennington</b>					
Address <b>5515 Wolf Run Dr.</b>			Registration Number, if PAC		
City <b>Gahanna</b>		Type* <b>LN</b> <input checked="" type="checkbox"/>	M <b>1</b>	D <b>0</b>	Y <b>1 5 1 6</b>
State <b>OH</b>		Zip Code <b>43230</b>		Amount <b>\$1,000.00</b>	
Form (Cash, Check, etc.) <b>Check</b>					
Full Name					
Address			Registration Number, if PAC		
City		Type* <b>RE</b>	M	D	Y
State <b>OH</b>		Zip Code		Amount	
Form (Cash, Check, etc.)					
Full Name					
Address			Registration Number, if PAC		
City		Type* <b>RE</b>	M	D	Y
State <b>OH</b>		Zip Code		Amount	
Form (Cash, Check, etc.)					
Full Name					
Address			Registration Number, if PAC		
City		Type* <b>RE</b>	M	D	Y
State <b>OH</b>		Zip Code		Amount	
Form (Cash, Check, etc.)					
Full Name					
Address			Registration Number, if PAC		
City		Type* <b>RE</b>	M	D	Y
State <b>OH</b>		Zip Code		Amount	
Form (Cash, Check, etc.)					
Full Name					
Address			Registration Number, if PAC		
City		Type* <b>RE</b>	M	D	Y
State <b>OH</b>		Zip Code		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.

**4,300.00**  
Page Total \$