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31-A-2 R.C. 3517.10(B)

Statement of Other Income

Page 2

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Citizens for David DeCapua			
Full Name Arlington Bank		_	Registration Number, if PAC
Address 2130 Tremont Center	Type*		0 7 3 0 1 5 \$0.61
City Upper Arlington	OH	Zip Code 43221	Form (Cash, Check, etc.) bank credit
Full Name			Registration Number, if PAC
Arlington Bank	,		
Address	Type*		0 8 3 1 1 5 \$0.61
2130 Tremont Center City	IN	Zip Code	0 8 3 1 1 5 \$0.61
Upper Arlington	OH	43221	bank credit
Full Name			Registration Number, if PAC
Arlington Bank			
Address	Type*		M D Y Amount 0 9 3 0 1 5 \$0.60
2130 Tremont Center	IN	, v. 4	0 9 3 0 1 5 \$0.60 Form (Cash, Check, etc.)
City Upper Arlington	State OH	Zip Code 43221	bank credit
Full Name			Registration Number, if PAC
Arlington Bank			
Address Control	Type*		1 0 3 0 1 5 \$0.47
2130 Tremont Center	IN _▼ State	Zip Code	1 0 3 0 1 5 \$0.47 Form (Cash, Check, etc.)
Upper Arlington	OH	43221	bank credit
Full Name			Registration Number, if PAC
Arlington Bank			
Address	Type*		M D Y Amount
2130 Tremont Center	IN _▼	Zip Code	1 1 3 0 1 5 \$0.36
City Upper Arlington	State OH	43221	bank credit
Full Name	011		Registration Number, if PAC
Arlington Bank			
Address	Type*		M D Y Amount
2130 Tremont Center	_IN		1 2 3 1 1 5 \$0.36
City Upper Arlington	State OH	Zip Code 43221	Form (Cash, Check, etc.) bank credit
Full Name	OH	40221	Registration Number, if PAC
Arlington Bank			
Address	Type*		M D Y Amount
2130 Tremont Center	IN 🔽_		
City	State	Zip Code	Form (Cash, Check, etc.)
Upper Arlington Full Name	_OH _	43221	Registration Number, if PAC
Arlington Bank			registation transci, a TAC
Address	Type*	esir.	M D Y Amount
2130 Tremont Center	_IN _ ▼ _	7: 0 1	Fam (Coh Chall 11)
City Upper Arlington	State OH	Zip Code 43221	Form (Cash, Check, etc.)
obbot variations	<u> </u>	1	<u> </u>

3.01
Page Total \$ _____

^{*} 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 carned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.