

FOR PAPER FILING ONLY

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full WERTHER FOR WHITEHALL					
Full Name PAUL WERTHER			Registration Number, if PAC		
Address 4483 SAN JOSE Lw.		Type* LN	M 06	D 14	Y 17
City WHITEHALL		State OH	Zip Code 43213		Amount \$100.00
Form (Cash, Check, etc.) CASH					
Full Name					
Address			Type*	M	D
City		State	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address			Type*	M	D
City		State	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address			Type*	M	D
City		State	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address			Type*	M	D
City		State	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address			Type*	M	D
City		State	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address			Type*	M	D
City		State	Zip Code	Y	Amount
Form (Cash, Check, etc.)					
Full Name					
Address			Type*	M	D
City		State	Zip Code	Y	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.