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Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full						_		
Paula Brooks Committee								
Full Name Debbie Wasserman Schultz For Congress					Registration Number, if PAC			
Address 1071 Twin Branch Ln		Type*	*		M 04	1	Y 2012	Amount \$500.00
City Weston	Sta FL	te	Zip Code 33326-2828	- 1	rm (Ca neck	Cash, Check, etc.)		
Full Name Friends of Terry J Brown				•		Registra	tion Nun	nber, if PAC
Address 550 E Walnut St		Type*			М 05	D 08	Y 2012	Amount \$120.00
City Columbus	State OH		Zip Code 43215-5323	- 1	rm (Ca neck	sh, Check	, etc.)	
Full Name L.A. Catering Registration Num						nber, if PAC		
Address 1699 W Mound St		Type*			M 09	D 05	Y 2012	Amount \$211.88
City Columbus	Stat	e	Zip Code 43223-1809		rm (Ca neck	ash, Check, etc.)		
Full Name Southwest Airlines Registration Num					aber, if PAC			
Address PO Box 36647		Type*			M 05	D 14	Y 2012	Amount \$28.00
City Dallas	Stat TX	e e	Zip Code 75235-1647			sh, Check c Transfe		

Page Total	\$859.88

^{*} 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 insufficent 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.