Statement of Other Income

.....<u>1</u>

Prescribed by Secretary of State 1/03

Name of Communes in Full	· · · · · · · · · · · · · · · · · · ·		- -
Central Onio Realtors Political	Action Committee		
Full Name			Registration Number, if PAC
PNC Bank		_	
Address P.O. Box 609	Ti∳e* IN		0 4 3 0 1 3 \$7.14
Cay	11N State	Zip Code	Form (Cash, Check, etc.)
Pissburgh	PA	15230	Bank Interest
Full Name		1	Registration Number, if PAC
PNC Bank			İ
Address	Time*		M: D Y Amount
P.O. Box 609	IN		0 5 3 1 1 3 56.91
City	State	Zip Code	Form (Cash, Check, etc.)
Pittsburgh	PA	15230	Bank interest
Full Neme			Registration Number, if PAC
Address	:\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		M; D; Y; Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
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Full Name			Registration Number, if PAC
Address	Zyģe"		M: D: Y: Amount
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City	State	Zip Code	Form (Cash, Check, etc.)
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Full Name			Registration Number, if PAC
Address	īyģe"		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
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Full Name			Registration Number, if PAC
Adáress	Type"		M D Y Amount
	_RE		a company the contract of
City	Same	Zip Code	Form (Cash, Check, etc.)
	OH	_	13
Full Name			Registration Number, if PAC
Address	:\ze		M D Y Amoun
	RE		a contrainment thereints
City		Zip Code	Form (Cash, Check, etc.)
	OH	<u> </u>	
Full Name		•	Registration Number, if PAC
Address	Type*		M. D. Y Amount
	RE		
City	27.5	Zip Code	Form (Cash, Check, etc.)
	OH	1	

14.05

Page Total S

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.