

Statement of Other Income

Prescribed by Secretary of State DOD

Name of Committee in Full					
Central Ohio Realtors Political Action Committee					
Full Name			Registration Number, if PAC		
PNC Bank					
Address	Type*		M	D	Y
P.O. Box 609	IN		0	4	3
City	State	Zip Code	Amount		
Pittsburgh	PA	15230	0 1 3 \$7.14		
Form (Cash, Check, etc.)			Bank Interest		
Full Name			Registration Number, if PAC		
PNC Bank					
Address	Type*		M	D	Y
P.O. Box 609	IN		0	5	3
City	State	Zip Code	Amount		
Pittsburgh	PA	15230	1 1 3 \$6.91		
Form (Cash, Check, etc.)			Bank Interest		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
	RE				
City	State	Zip Code	Amount		
	OH				
Form (Cash, Check, etc.)			Bank Interest		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
	RE				
City	State	Zip Code	Amount		
	OH				
Form (Cash, Check, etc.)			Bank Interest		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
	RE				
City	State	Zip Code	Amount		
	OH				
Form (Cash, Check, etc.)			Bank Interest		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
	RE				
City	State	Zip Code	Amount		
	OH				
Form (Cash, Check, etc.)			Bank Interest		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
	RE				
City	State	Zip Code	Amount		
	OH				
Form (Cash, Check, etc.)			Bank Interest		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
	RE				
City	State	Zip Code	Amount		
	OH				
Form (Cash, Check, etc.)			Bank Interest		

* 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.