31	-/	4-	2	
R.	C. :	351	7.10	(B)

Statement of Other Income

	4	
Page	1	
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Prescribed by Secretary of State 2/01

Name of Committee in Full				
Central Ohio Political Action Commit	tee			
Full Name			Registration Number, if PAC	
PNC Bank				
Address P.O. Box 609	Type*	A. The state of th	M D Y Amount 0 6 3 0 1 5 \$0.02	
City	IN State	Zip Code	0 6 3 0 1 5 \$0.02 Form (Cash, Check, etc.)	
Pittsburgh	PA	15230	Torin (Casil, Check, Ste.)	
ull Name			Registration Number, if PAC	
PNC Bank				
Address	Type*		M D Y Amount	
P.O. Box 609	IN		0 7 3 1 1 5 \$0.01	
City	State	Zip Code	Form (Cash, Check, etc.)	
Pittsburgh Full Name	PA PA	15230	Designation Number (FDAC)	
ull Name PNC Bank			Registration Number, if PAC	
Address	Type*		M D Y Amount	
P.O. Box 609	IN		0 8 3 1 1 5 \$0.02	
City	State	Zip Code	Form (Cash, Check, etc.)	
Pittsburgh	PA	15230		
Ful! Name			Registration Number, if PAC	
Add	1 71 -		No. 1 No. 1	
Address	Type*		M D Y Amount	
City	IN State	Zip Code	Form (Cash, Check, etc.)	
•			Form (Cash, Check, etc.)	
Full Name			Registration Number, if PAC	
Address	Type*	T 1	M D Y Amount	
	RE	S. Carlotte		
City	State	Zip Code	Form (Cash, Check, etc.)	
Full Name	OH	<u> </u>	Registration Number, if PAC	
			Taggaranou Hambon, II I I I	
Address	Type*	W	M D Y Amount	
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	OH			
Full Name			Registration Number, if PAC	
Address	T.L4		No. IT VI America	
nuuiss	Type*		M D Y Amount	
City	RE Stape	Zip Code	Form (Cash, Check, etc.)	
-	OH			
Name		Registration Number, if PAC		
Address	Type*		M D Y Amount	
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	OH			

0.05

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 earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.