

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full David Tyack for Judge Committee					
Full Name total from statement of loans received 31C				Registration Number, if PAC	
Address	Type* RE		M 1	D 0	Y 5
City	State OH	Zip Code	Amount \$1,000.00		Form (Cash, Check, etc.)
Full Name				Registration Number, if PAC	
Address	Type* RE		M	D	Y
City	State OH	Zip Code	Amount		Form (Cash, Check, etc.)
Full Name				Registration Number, if PAC	
Address	Type* RE		M	D	Y
City	State OH	Zip Code	Amount		Form (Cash, Check, etc.)
Full Name				Registration Number, if PAC	
Address	Type* RE		M	D	Y
City	State OH	Zip Code	Amount		Form (Cash, Check, etc.)
Full Name				Registration Number, if PAC	
Address	Type* RE		M	D	Y
City	State OH	Zip Code	Amount		Form (Cash, Check, etc.)
Full Name				Registration Number, if PAC	
Address	Type* RE		M	D	Y
City	State OH	Zip Code	Amount		Form (Cash, Check, etc.)
Full Name				Registration Number, if PAC	
Address	Type* RE		M	D	Y
City	State OH	Zip Code	Amount		Form (Cash, Check, etc.)
Full Name				Registration Number, if PAC	
Address	Type* RE		M	D	Y
City	State OH	Zip Code	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.

1,000.00
Page Total \$