31-A-2
R.C. 3517.10(B)

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Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full: STAGE FOR MAYOR

Full Name	Registration Number, if PAC		
CHECK #118 NOT CASHED			
Address	**Type***	**M / D / Y**	**Amount**
"BIGGameProgram"		11 / 20 / 15	495.00
City	**State** / **Zip Code**	**Form (Cash, Check, etc.)**	
See Cover Letter		CK	

Full Name	Registration Number, if PAC		
CHECK # 129 Returned			
Address	**Type***	**M / D / Y**	**Amount**
"Frank & Jeff Davis"		11 / 20 / 15	250.00
City	**State** / **Zip Code**	**Form (Cash, Check, etc.)**	
		ck	

Full Name	Registration Number, if PAC		
Address	**Type***	**M / D / Y**	**Amount**
City	**State** / **Zip Code**	**Form (Cash, Check, etc.)**	

Full Name	Registration Number, if PAC		
Address	**Type***	**M / D / Y**	**Amount**
City	**State** / **Zip Code**	**Form (Cash, Check, etc.)**	

Full Name	Registration Number, if PAC		
Address	**Type***	**M / D / Y**	**Amount**
City	**State** / **Zip Code**	**Form (Cash, Check, etc.)**	

Full Name	Registration Number, if PAC		
Address	**Type***	**M / D / Y**	**Amount**
City	**State** / **Zip Code**	**Form (Cash, Check, etc.)**	

Full Name	Registration Number, if PAC		
Address	**Type***	**M / D / Y**	**Amount**
City	**State** / **Zip Code**	**Form (Cash, Check, etc.)**	

Full Name	Registration Number, if PAC		
Address	**Type***	**M / D / Y**	**Amount**
City	**State** / **Zip Code**	**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.

Page Total $ 745.00