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R	C.	351	١7.	100	B

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Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full				
GILL FOR JUDGE				
Full Name			Registration Number, if PAC	
ELIZABETH GILL				
Address	Type*		M D Y Am	ount
90 E MITHOFF STREET	I. N		0 5 1 0 0 6	1,973.91
City	State	Zip Code	Form(Cash,Check,etc)	
COLUMBUS	O H	43206		
Full Name	0 11	10200	Registration Number, if PAC	
ELIZABETH GILL			,	
Address	Type*		M D Y Am	ount
•	1			293.56
90 E MITHOFF STREET	LN	IS: 0.1		293.30
City	State	Zip Code	Form(Cash,Check,etc)	
COLUMBUS	ОН	43206		
Full Name			Registration Number, if PAC	
ELIZABETH GILL				
Address	Type*			ount
90 E MITHOFF STREET	L N		0 5 2 3 0 6	1,314.00
City	State	Zip Code	Form(Cash,Check,etc)	
COLUMBUS	$O \mid H$	43206		
Full Name			Registration Number, if PAC	
ELIZABETH GILL				
Address	Type*		M D Y Am	ount
90 E MITHOFF STREET	I. N		0 5 2 6 0 6	229.58
City	State	Zip Code	Form(Cash,Check,etc)	
COLUMBUS	$O \mid H$	43206	· · · · · · · · · · · · · · · · · · ·	
Full Name	1.0	70-00	Registration Number, if PAC	
Tun Palino			,	
Address	Type*		M D Y Am	ount
Addices	1,500			
Cit	State	Zip Code	Form(Cash,Check,etc)	
City	State	Zip Code	Torin(Cash, Check, Cic)	
P. 1137		<u> </u>	Registration Number, if PAC	
Full Name		4		
			N I D I V Iam	ount
Address	Type*		M D Y Am	ount
City	State	Zip Code	Form(Cash,Check,etc)	
		<u> </u>		
Full Name			Registration Number, if PAC	
Address	Type*		M D Y Am	ount
City	State	Zip Code	Form(Cash,Check,etc)	
Full Name		<u> </u>	Registration Number, if PAC	
Address	Type*		M D Y Am	ount
City	State	Zip Code	Form(Cash,Check,etc)	
City				
				

Page Total \$ 3.811.05

^{*} 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, place the letters 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.