Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full		·	
Citizens for Hawk			
Full Name			Registration Number, if PAC
Hay Family Trust; Myrtle Hay, Trustee	T = ** ·		
Address 5750 Ravine Creek Dr	Type*		M D Y Amount 0 4 0 9 1 2 \$15,000.00
Sity City	LN State	Zîp Code	0 4 0 9 1 2 \$15,000.00
City Grove City	OH State	43123	Form (Cash, Check, etc.) Check
Full Name			Registration Number, if PAC
Keith Hawk		; 1	
Address	Type*		M D Y Amount
2374 White Rd	LN		0 4 0 9 1 2 \$20,000.00
City	State	Zip Code	Form (Cash, Check, etc.)
Grove City	OH	43123	Check
Full Name			Registration Number, if PAC
Address		· · · · · · · · · · · · · · · · · · ·	M I D I V
Address	Type*		M D Y Amount
City	RE State	Zip Code	Form (Cash, Check, etc.)
•	OH	· - -	,,
Full Name			Registration Number, if PAC
		1	
Address	Type*		M. D. Y. Amount
	RE _		
City	State	Zip Códe	Form (Cash, Check, etc.)
Full Name	OH	1	December 1
Full Name			Registration Number, if PAC
Address	Type*		M D Y _I Amount
· · · · ·	RE RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	OH ⁱ		
Full Name	<u> </u>	<u>-</u>	Registration Number, if PAC
		<u>.</u> †	
Address	Type*		M D Y Amount
Cin	RE	Zin Code	Form (Cash Charle sta.)
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name	Un		Registration Number, if PAC
		i I	
Address	Туре*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	OH	:	
Full Name			Registration Number, if PAC
Address	192 ± 4	÷	M D Y _i Amount
Address	Type* RE		Amount Amount
City	State _	Zip Code	Form (Cash, Check, etc.)
, my	OH		

35,000.00
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.