Statement of Other Income

Page 5

Prescribed by Secretary of State 2/01

| Name of Committee in Full Citizens for Bonnie Michael | | | |
|---|-------------|----------|--|
| Full Name | | | Registration Number, if PAC |
| First Financial Bank, NA | | | Registration Number, II FAC |
| Address | Type* | | M D Y Amount |
| | IN | | 0 7 3 1 1 5 \$0.16 |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Hamilton | OH | 45012 | Bank Acct, Interest |
| Fuli Name | | • | Registration Number, if PAC |
| First Financial Bank, NA | | | |
| Address | Type• | | M D Y Amount |
| | IN | | 0 8 3 1 1 5 \$0.11 |
| City | Starte | Zip Code | Form (Cash, Check, etc.) |
| Hamilton Full Name | OH | 45012 | Bank Acct. Interest |
| First Financial Bank, NA | | | Registration Number, if PAC |
| Address | Туре* | | M D Yi Amount |
| 7.00.03 | IN IN | | 0 9 3 1 1 5 \$0.11 |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Hamilton | OH | 45012 | |
| Full Name | | | Registration Number, if PAC |
| First Financial Bank, NA | • | | |
| Address | Type* | | M _i D Y _i Amount |
| | IN | | 1 0 1 4 1 5 \$0.10 |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| Hamilton | ОН | 45012 | |
| Full Name | | | Registration Number, if PAC |
| Address | Tyipe* | _ | M D Y Amount |
| | RÉ | | |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| | ОН | | |
| Full Name | | : | Registration Number, if PAC |
| | | | |
| Address | Type* | | M D Y Amount |
| | RE | _ | |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| E-II Manua | OH | | Paristration Number (CDAC) |
| Full Name | | | Registration Number, if PAC |
| Address | Type* | | M D Y Amount |
| 7.000 | RE | | M D I Amount |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| | Гон' | • | |
| Full Name | | | Registration Number, if PAC |
| | | | |
| Address | Type* | | M D Y Amount |
| | RE | | |
| City | State | Zip Code | Form (Cash, Check, etc.) |
| l | OH | | |

0.48
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.