

Statement of Other Income

Prescribed by Secretary of State 2/01

| | | | | | | | |
|---|--|--------------------|--------------------------|--|---------------|---------------|-------------------------|
| Name of Committee in Full Citizens for Bonnie Michael | | | | | | | |
| Full Name First Financial Bank, NA | | | | Registration Number, if PAC | | | |
| Address | | Type* IN | | M 0 | D 7 | Y 3 | Amount \$0.16 |
| City Hamilton | | State OH | Zip Code 45012 | Form (Cash, Check, etc.) Bank Acct. Interest | | | |
| Full Name First Financial Bank, NA | | | | Registration Number, if PAC | | | |
| Address | | Type* IN | | M 0 | D 8 | Y 3 | Amount \$0.11 |
| City Hamilton | | State OH | Zip Code 45012 | Form (Cash, Check, etc.) Bank Acct. Interest | | | |
| Full Name First Financial Bank, NA | | | | Registration Number, if PAC | | | |
| Address | | Type* IN | | M 0 | D 9 | Y 3 | Amount \$0.11 |
| City Hamilton | | State OH | Zip Code 45012 | Form (Cash, Check, etc.) | | | |
| Full Name First Financial Bank, NA | | | | Registration Number, if PAC | | | |
| Address | | Type* IN | | M 1 | D 0 | Y 1 | Amount \$0.10 |
| City Hamilton | | State OH | Zip Code 45012 | Form (Cash, Check, etc.) | | | |
| Full Name | | | | Registration Number, if PAC | | | |
| Address | | Type* RE | | M | D | Y | Amount |
| City | | State OH | Zip Code | Form (Cash, Check, etc.) | | | |
| Full Name | | | | Registration Number, if PAC | | | |
| Address | | Type* RE | | M | D | Y | Amount |
| City | | State OH | Zip Code | Form (Cash, Check, etc.) | | | |
| Full Name | | | | Registration Number, if PAC | | | |
| Address | | Type* RE | | M | D | Y | Amount |
| City | | State OH | Zip Code | Form (Cash, Check, etc.) | | | |
| Full Name | | | | Registration Number, if PAC | | | |
| Address | | Type* RE | | M | D | Y | Amount |
| City | | State OH | 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.