Statement of Other Income

Page	
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Prescribed by Secretary of State 2/01

Name of Committee in Full			
Friends Of Cortez Bogard			
Full Name	Registration Number, if PAC		
Cortez Lee Bogard			
Address	Type		M D Y Amount
379 W. 4th Ave	LN		0 2 0 3 1 2 \$24.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43201	cash
Full Name	Registration Number, if PAC		
Cortez Lee Bogard			
Address	Type*		0 2 0 3 1 2 \$39,000.00
379 W. 4th Ave	LN	7.01	0 2 0 3 1 2 \$39,000.00 Form (Cash, Check, etc.)
City	OH	Zip Code 43201	Check
Columbus Full Name	1 00	43201	Registration Number, if PAC
Cortez Lee Bogard	The second secon		
Address	Type"		M D Y Amount
379 W 4th Ave	LN		0 2 2 2 1 2 \$11,500.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH.	43201	check
Full Name			Registration Number, if PAC
			1
Address	Type*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
l	OH		
Full Name		<u> </u>	Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		Regustration Number, if PAC
Full Name	Regulation Number, it FAC		
Address	Type*		M D Y Amount
Address	RE	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
City	State -	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name	1 0	<u> </u>	Registration Number, if PAC
Address	Type	¥ 27	M D Y Amount
	RE		
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.)
	OH	1	

50,524.00

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.