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Statement of Other Income

Page	1	

Prescribed by Secretary of State 2/01

Name of Committee in Full				†
Laborers' International Union of No	rth America, Local 423			
Full Name	· · · · · · · · · · · · · · · · · · ·		Registration Number, if PAC	†
Chase Bank				
Address	Type*	$(N+4+2)_{1,2,3} \leq 2^{-n} \leq 2^{-n}$	M D Y Amount	
Lockbourne Branch	RE		0 4 3 0 1 3 \$0.55	
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43206		
Full Name			Registration Number, if PAC	
Chase Bank				
Address	Type*		M D Y Amount	
Lockbourne Branch	RE	Section of Section . The	0 5 3 1 1 3 \$0.53	
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43206	Projection Number (CR) C	- FA-2-3
Full Name			Registration Number, if PAC	
Address	Type*	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	M D Y Amount	;
Notices	RE	in the second		1
City	Stage	Zip Code	Form (Cash, Check, etc.)	
	OH.	1		€ 3
Full Name		_ -	Registration Number, if PAC	
Address	Type*		M D Y Amount	1
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	OH		A Second	
Full Name			Registration Number, if PAC	
Address	Type*	Carlo Sylver	M D Y Amount	Ī
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	OH			
Full Name	<u> </u>		Registration Number, if PAC	
Address	Type*		M D Y Amount	1
	RE	37.		
City	State	Zip Code	Form (Cash, Check, etc.)	rigen Terrer
	OH			
Full Name		Registration Number, if PAC		
			Y I D I Y I Amora	
Address	Type*		M D Y Amount	
City	State	Zip Code	Form (Cash, Check, etc.)	
	ОН			
Full Name			Registration Number, if PAC	
Address	Type*	Q 792 7, 5	M D Y Amount	i
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	OH			

1.08

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.