



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee						
Coleman for Columbus						
Full Name of Contributor				Registration Number, if PAC		
Fifth Third Bank						
Street Address	Type*	Date (MW/D			Form (Cash, Check, etc.)	
21 E State St	Refund)	12/31/2018		VOID 4/22/2016	
City	State	Zip Cod	Zip Code		Amount	
Columbus	он 🤇)	43215		\$30	
Full Name of Contributor				Registration Number, if PAC		
World's Art						
Street Address	Type*	Date (MM/D		D/YYYY)	Form (Cash, Check, etc.)	
	Refund)		12/31/2018	VOID #7354 12/13/2011	
City	State	Zip Code			Amount	
	он				\$300	
Full Name of Contributor				Registration Number, if PAC		
Keisha Hunley Jenkins						
Street Address	Type*	Date (M	Date (MW/DD/YYYY)		Form (Cash, Check, etc.)	
2656 Berwick Blvd	Refund	•	12/31/2018		VOID #8041 12/14/2015	
City	State	Zip Coo	Zip Code		Amount	
Columbus	он			43209	\$50	
Full Name of Contributor				Registration Number, if PAC		
Ohio Bureau of Workers' Compensation						
Street Address	Type*	Date (M	Date (MM/DD/YYYY)		Form (Cash, Check, etc.)	
30 W Spring St	Refund)	12/31/2018		VOID #8042 12/14/2015	
City	State	Zip Coo	le		Amount	
Columbus	он	•]		43215	\$99.29	
Full Name of Contributor			Registration Number, if PAC			
Lamda Boule						
Street Address	Type*	Date (N	/M/D	D/YYYY)	Form (Cash, Check, etc.)	
260 Peachtree St NW	Refund			12/31/2018	VOID #6696 4/29/2010	
City	State	Zip Coo	le		Amount	
Atlanta	GA G	303	303		\$1,150.00	

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.