31	-A	-2
R.O	0.35	17.10(B)

Statement of Other Income

Page	2	_

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Committee to Re-Elect Judge Bende	er		
Full Name Huntington National Bank			Registration Number, if PAC
Address	Type*		M D Y Amount
South High Street	RE		0 1 2 8 1 5 \$7.50
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Credit
Full Name			Registration Number, if PAC
Address	Type* RE		M D Y Amount
City	State	Zip Code	Form (Cash, Check, etc.)
Full Name	ОН		Registration Number, if PAC
run ivanie			- Indiana in indiana ind
Address	Type*		M D Y Amount
	RE		
City	Static	Zip Code	Form (Cash, Check, etc.)
Full Name	OH	1	Registration Number, if PAC
Address	Type*		M D Y Amount
Cit.	RE State	72:- 5	T- (C) A
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name	<u> </u>	<u> </u>	Registration Number, if PAC
Address	Type*		M D Y Amount
City	RE State	Zip Code	Form (Cash, Check, etc.)
City	State OH	Sip Colic	Form (Cash, Check, etc.)
Full Name		<u> </u>	Registration Number, if PAC
Address	Type*		M D Y Amount
City	RE State	Zip Code	Form (Cash, Check, etc.)
	OH	1	Form (Cash, Check, Cle.)
Full Name	L	· · · · · · · · · · · · · · · · · · ·	Registration Number, if PAC
Addresse			Ad I D VI
Address	Type*		M D Y Amount
City	RE Stage	Zip Code	Form (Cash, Check, etc.)
	ОН		4
Full Name			Registration Number, if PAC
Address	Туре*		M D Y Amount
	RE _		
City	State	Zip Code	Form (Cash, Check, etc.)
	ОН		

7.50

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.