Page	4

## **Statement of Other Income**

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Friends of Kristin Bryant							
Full Name			Registration Number, if PAC				
Friends of Jeni Quesenberry					T	Υ	
Address	Type*		М	D	Y	Amount	
4100 Regent St, Ste A	R E		0 4				225.48
City	State	Zip Code	1	ash,Checl			
Columbus	ОН	43219	<u> </u>	Chec!	k		
Full Name			Registra	tion Num	ber, if PA	.C	
Friends of Mildred Johnson							
Address	Type*		M	D	Y	Amount	
4100 Regent St, Ste A	R E		0 4				225.48
City	State	Zip Code	Form(Ca	Form(Cash,Check,etc)			
Columbus	ОН	43219	Check				
Full Name			Registration Number, if PAC				
Address	Type*		М	D	Y	Amount	
City	State	Zip Code	Form(Ca	sh,Checl	c,etc)		
	1						
Full Name	<u> </u>		Registra	tion Num	ber, if PA	.C	
Address	Type*		М	D	Y	Amount	
Audi Cas	Турс		141		Ι.	, unoun	
City	State	Zip Code	Form(Ca	sh,Checl	(etc)		
city	State	Zip code	I ornice	isii,Ciicor	ι,οιο,		
Full Name	<u> </u>		Pagistra	tion Num	ber, if PA	C	
run Name			Registia	tion Num	bei, ii r A		
Add	T *		M	I D	I v	TA	
Address	Type*		М	D	Y	Amount	
		a: 0 1	F (0	1 61 1			*****
City	State	Zip Code	Form(Cash,Check,etc)				
E W.)	l		The state of the s				
Full Name		Registration Number, if PAC					
				T		Γ.	
Address	Type*		М	D	Y	Amount	
					<u> </u>		
City	State	Zip Code	Form(Ca	ash,Checl	(,etc)		
Full Name		Registration Number, if PAC					
Address	Type*		М	D	Y	Amount	
					J		
City	State	Zip Code	Form(Ca	ash,Check	c,etc)		
Full Name			Registration Number, if PAC				
Address	Type*		М	D	Y	Amount	
1	1	i.					
City	State	Zip Code	Form(Ca	ash,Checl	(,etc)		

SA for the sale of committee assets, or LN for payments received on a loan made.

Page Total \$ \_\_\_\_450.96\_

<sup>\*</sup> 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, place the letters IN for any investment or interest income earned by the committee,