## **Statement of Other Income**

Prescribed by Secretary of State 2/01

			MONTH OF THE PARTY	orapitocomonympowerodeny.	managa kanaga daya da			
Name of Committee in Full								
Teachers for Better Schools			<del>1</del>	orinomoranie oranie	merce services and			
Full Name			Registrat	tion Numb	per, if PA	C		
Fifth Third Bank				~				
Address	Type*		М	D	Y	Amount		
P.O.Box 630900	IN		0   4		20 09		0.60	
City	State	Zip Code		sh,Check				
Cincinnati	OH	43205	Dire	ct De	posit			
Full Name			Registrat	tion Numl	ber, if PA	C		
Fifth Third Bank			1					
Address	Type*		М	D	Y	Amount		
P.O.Box 630900	IN		0 5	2 7	20 09		0.62	
City	State	Zip Code		sh,Check	,etc)			
Cincinnati	OH	43205	Dire	ct De	posit			
Full Name				tion Numl				
Address	Type*		М	D	Y	Amount		
7000000	1							
City	State	Zip Code	Form(C)	sh,Check	etc)			
CHY	State	Zip code	I dini(et	ion, encon	.,010)			
E UA	1		Pagistra	tion Num	har if DA			
Full Name			Registia	HOB INHIII	ber, II PA			
				1 5	<del>, ,,</del>	Y		
Address	Туре*		М	D	Y	Amount		
City	State	Zip Code	Form(Ca	ash,Check	.,etc)			
Full Name			Registration Number, if PAC					
Address	Type*		М	D	Y	Amount		
City	State	Zip Code	Form(Cash,Check,etc)					
Full Name				Registration Number, if PAC				
Address	Type*		М	D	Y	Amount		
	1 1							
City	State	Zip Code	Form(C)	ash,Check	(etc)			
City	State	1547 Godo	l'oim(o		,,,,,,			
F. II Name			Registra	ition Num	her if PA			
Full Name				Registration Number, if PAC				
	Tr		M	D	ΙΥ	Amount		
Address	Type*		iVI		1 '	AHIOUIR		
					ـــنِـــــــــــــــــــــــــــــــــ			
City	State	Zip Code	Form(C	Form(Cash,Check,etc)				
Full Name				Registration Number, if PAC				
Address	Type*		М	D	Y	Amount		
					:			
City	State	Zip Code	Form(C	ash,Checl	(,etc)			
			1					
		Cd - Od - Jane Danier	I. D.E. Cara					

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

Page Total \$ 1.22

<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,