31-A-2 R.C. 3517.10(B)

Page	5

Statement of Other Income

Prescribed by Secretary of State 2/01

N. 60								
Name of Committee in Full Citizens Committee for Persons with I	תר							
Full Name	J.D.		Registra	tion Nun	iber, if Pa	A.C.		
Net Earnings from Chase Bank Investme	nts		Registra	iton tyun	ioci, ii F7	NC .		
Address	Type*		М	D	Y	Amount		
P.O. Box 260180	$I \mid N$		0 1	0 1	1 4		3.53	
City	State	Zip Code	Form(Ca	ash,Chec	k,etc)			
Baton Rouge	<u> </u>	70826-0180						
Full Name			Registra	tion Nun	ber, if P	AC		
Address	Type*		М	D	Y	Amount		
	1					1		
City	State	Zip Code	Form(Ca	ish,Chec	k,etc)		•	
Full Name			Registration Number, if PAC					
					,	1		
Address	Type*		M	D	Y	Amount		
C2	St	# 0 1	1	1 21	<u> </u>			
City	State	Zip Code	Fonn(C	ash,Chec	k,etc)			
Full Name			Registration Number, if PAC					
					,			
Address	Type*		М	D	Y	Amount		
City	State	Zip Code	Form(C	ash,Chec	k,etc)			
Full Name			Registra	tion Nun	ber, if Pa	AC .	,	
Address	Type*		M	D	Y	Amount		
	1					l'anount		
City	State	Zip Code	Form(Ca	ash,Chec	k,etc)			
		•	ì		. ,			
Full Name			Registration Number, if PAC					
Address	Type*		М	D	Y	Amount		
			<u> </u>					
City	State	Zip Code	Form(C:	ash,Chec	k,etc)			
Full Name		<u></u>	Registra	tion Num	iber, if Pa	A.C.		
i un raune			Registra	ition wait	ioci, ii i z	40		
Address	Type*		М	D	Y	Amount		
	1		1					
City	State	Zip Code	Form(C	ash,Chec	k,etc)			
Full Name			Registra	tion Nun	nber, if Pa	AC		
Address	Т*		3.4		T v	Ta		
Audiess	Type*		M	D	Y	Amount		
City	State	Zip Code	Form(Ca	sh.Chec	k.etc)			
	i i	, see .			,			

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

Page Total \$	3.53

^{*} 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,