31-	A-	2	
R.C.	351	7.1	0(B)

Statement of Other Income

Page	2		

Prescribed by Secretary of State 2/01

Name of Committee in Full		<u> </u>			
Worthington Community for Schools			Registration Number, if PAC		
Tull Name Huntington National Bank			Registration Number, it FAC		
Address	Type*		M D Y Amount		
High Street	IN		0 1 3 0 1 2 \$9.12		
City	State OH	Zip Code 43085	Form (Cash, Check, etc.)		
Worthington Full Name	011		Registration Number, if PAC		
run name					
Address	Type*		M D Y Amount		
City	State OH	Zip Code	Form (Cash, Check, etc.)		
Full Name	1 011	<u> </u>	Registration Number, if PAC		
•					
Address	Type*		M D Y Amount		
City	State	Zip Code	Form (Cash, Check, etc.)		
Full Name	OH_		Registration Number, if PAC		
run ranc					
Address	Type*		M D Y Amount		
	RE Staje	Zip Code	Form (Cash, Check, etc.)		
City	OH				
Full Name			Registration Number, if PAC		
Address	Type*	the second to the	M D Y Amount		
	RE Staje	Zip Code	Form (Cash, Check, etc.)		
City	OH				
Full Name			Registration Number, if PAC		
Address	Type*		M D Y Amount		
	RE		Form (Cash, Check, etc.)		
City	State OH	Zip Code	Form (Cash, Check, etc.)		
Full Name			Registration Number, if PAC		
	Time	•	M D Y Amount		
Address	Type*				
City	State	Zip Code	Form (Cash, Check, etc.)		
Full Name	OH		Registration Number, if PAC		
			M D Y Amount		
Address	Type•				
City	State OH	Zip Code	Form (Cash, Check, etc.)		

9.12

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.