

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full Worthington Community for Schools					
Full Name Huntington National Bank				Registration Number, if PAC	
Address High Street		Type* IN		M 0	D 1
City Worthington		State OH	Zip Code 43085	Y 3	Amount \$9.12
				Form (Cash, Check, etc.)	
Registration Number, if PAC					
Full Name				Registration Number, if PAC	
Address		Type*		M	D
City		State	Zip Code	Y	Amount
		RE			
		OH			
				Form (Cash, Check, etc.)	
Registration Number, if PAC					
Full Name				Registration Number, if PAC	
Address		Type*		M	D
City		State	Zip Code	Y	Amount
		RE			
		OH			
				Form (Cash, Check, etc.)	
Registration Number, if PAC					
Full Name				Registration Number, if PAC	
Address		Type*		M	D
City		State	Zip Code	Y	Amount
		RE			
		OH			
				Form (Cash, Check, etc.)	
Registration Number, if PAC					
Full Name				Registration Number, if PAC	
Address		Type*		M	D
City		State	Zip Code	Y	Amount
		RE			
		OH			
				Form (Cash, Check, etc.)	
Registration Number, if PAC					
Full Name				Registration Number, if PAC	
Address		Type*		M	D
City		State	Zip Code	Y	Amount
		RE			
		OH			
				Form (Cash, Check, etc.)	
Registration Number, if PAC					
Full Name				Registration Number, if PAC	
Address		Type*		M	D
City		State	Zip Code	Y	Amount
		RE			
		OH			
				Form (Cash, Check, etc.)	
Registration Number, if PAC					

* 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.