Statement of Other Income

Page	1	

Prescribed by Secretary of State 2/01

Name of Committee in Full				
BEATTY FOR JUDGE				
Full Name			Registration Number, if PAC	
Laurel Beatty				
Address	Type*		M. D. Y. Amount	
268 East Gates	LN		\$700.00	
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	ОН	43206	Check	
Full Name			Registration Number, if PAC	
Address	Type*		M D Y Amount	
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	ОН			
Full Name			Registration Number, if PAC	
Address	T:*		M	
vinnes?	Type*		M D Y Amount	
City	RE Stație –	Zip Code	Form (Cash, Check, etc.)	
,	OH	Zip Code	Torns (Casas, Circus, Cir.)	
Full Name	011		Registration Number, if PAC	
Address	Type*		M D Y Amount	
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	OH			
Full Name			Registration Number, if PAC	
Address	Type*		M D Y Amount	
110mm 623			Amount	
City	RE State	Zip Code	Form (Cash, Check, etc.)	
	OH		The state of the s	
Full Name			Registration Number, if PAC	
Address	Type*		M D Y Amount	
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	OH			
Full Name			Registration Number, if PAC	
	· ·			
Address	Type*		M D Y Amount	
	RE _	B. 4.1		
City	State	Zip Code	Form (Cash, Check, etc.)	
E-II N	_OH	<u> </u>	Paristration Number (CDA)	
Full Name			Registration Number, if PAC	
Address	Type*		M D Y Amount	
	RE			
City	State	Zip Code	Form (Cash, Check, etc.)	
	OH			
	• ,	•		

700.00 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.