31	-/	١-	2		
R.	C. 3	51	7.1	<b>0</b> (E	,

## **Statement of Other Income**

Page 2

Prescribed by Secretary of State 2/01

Name of Committee in Full			N=
Worthington Community for Schools			
Full Name Huntington National Bank			Registration Number, if PAC
Address 7 Easton Oval	Type*		M D Y Amount 1 2 3 1 1 4 \$0.85
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43219	Cash
Full Name			Registration Number, if PAC
Address	Type* RE		M D Y Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
City	State	Zip Code	Form (Cash, Check, etc.)
Full Name	1 0		Registration Number, if PAC
Address	Type*		M D Y Amount
City	State	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
City	State	Zip Code	Form (Cash, Check, etc.)
Fult Name	1		Registration Number, if PAC
Address	Type*		M D Y Amount
City	State	Zip Code	Form (Cash, Check, etc.)
Full Name	<u> </u>		Registration Number, if PAC
Address	Type*		M D Y Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*		M D Yi Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)

0.85

Page Total \$

<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, 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.