## Statement of Other Income Prescribed by Secretary of State 2/01

Name of Committee in Full						
riends of I an	Friends of Ian Mykel					
Key Bank			Registration	on Number, if l	PAC	
Address 5633 High St	Refund		<sup>™</sup> 3	3117	Amount 3.00	
Worthington	State	Zip Code 43085	Form (Cas	sh, Check, etc.)		
Full Name Rey Bank			Registration Number, if PAC			
J633 High St	Refund		<sup>M</sup> 9	2717	Amount 33.00	
worthing ton	State	Zip Code 43085	Form (Cas	sh, Check, etc.)		
Full Name			Registration Number, if PAC			
Address	Type*		M	D Y	Amount	
City	State	Zip Code	Form (Cas	sh, Check, etc.)		
Full Name			Registration Number, if PAC			
Address	Type*		M	D Y	Amount	
City	State	Zip Code	Form (Cas	h, Check, etc.)		
uli Name			Registration Number, if PAC			
Address	Type*		M	D Y	Amount	
City	State	Zip Code	Form (Cas	h, Check, etc.)		
Full Name			Registration Number, if PAC			
Address	Type*		M	D Y	Amount	
City	State	Zip Code	Form (Casi	h, Check, etc.)		
Full Name			Registration Number, if PAC			
Address	Type*		M	D Y	Amount	
City	State	Zip Code	Form (Casi	h. Check, etc.)		
Full Name			Registration Number, if PAC			
			_			
Address	Type*		Mi	D Y	Amount	
City	State	Zip Code	Form (Cas	h, Check, etc.)		

Page Total \$ 36.00

<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.