31-A-2
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Statement of Other Income

Prescribed by Secretary of State 2001

Name of Committee in Full: Kambon.Edu

Full Name	Address	City	State	Zip Code	Type*	Registration Number, if PAC	M	D	Y	Amount	Form (Cash, Check, etc.)
Hanifah Kambon	63 N. Ohio Ave	Columbus	Oh	43203	LOAN		09	30	13	300.00	3686
Chase Bank	833 S. High St	Columbus	Oh	43206			08	07	13	15-	Fee Reversal
Chase Bank	833 S. High St	Columbus	Oh	43206			08	07	13	15-	Fee Reversal
Chase Bank	833 S. High St	Columbus	Oh	43206			08	07	13	15-	Fee Reversal
Chase Bank	833 S. High St	Columbus	Oh	43206			08	07	13	15-	Fee Reversal
Chase Bank	833 S. High St	Columbus	Oh	43206			08	07	13	15-	Fee Reversal

* 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.

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