Statement of Other Income

Page 1

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Good Schools Committee			In the state of th
Full Name KeyBank			Registration Number, if PAC
Address	Type*		M D Y Amount
88 East Broad St.	IN	A STATE OF THE STA	0 9 3 0 1 2 \$0.41
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	cash (Residential Number (CDAC)
Full Name			Registration Number, if PAC
Address	Type* RE	1.1.1	M D Y Amount
City	State	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name			Registration Number, if PAC
Address	Type*	A CONTRACTOR	M D Y Amount
	RE	, A	
City	State	Zip Code	Form (Cash, Check, etc.)
	ОН	<u> </u>	Projectorion Number (CDAC)
Full Name			Registration Number, if PAC
Address	Type*	the state of the s	M D Y Amount
	RE		Francisco de Circo
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name	1 011		Registration Number, if PAC
			
Address	Type		M D Y Amount
City	RE State	Zip Code	Form (Cash, Check, etc.)
,	OH		
Full Name	<u></u>	***************************************	Registration Number, if PAC
Address	Туре*	English Commence	M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
T. D.M.	OH		Registration Number, if PAC
Full Name			regionation (runios), il FAC
Address	Туре*		M D Y Amount
	RE .	Zin Code	Form (Cash, Check, etc.)
City	Stațe	Zip Code	Form (Casil, Check, etc.)
Full Name	OH		Registration Number, if PAC
	T #.L		M D Y Amount
Address	Type* RE	and the second	Allowin
City·	State -	Zip Code	Form (Cash, Check, etc.)
	OH _		

0.41

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.