31-	A-2	
R.C.	3517.	10(B)

## **Statement of Other Income**

	4	
Page	_1	_ !

Prescribed by Secretary of State 2/01

Name of Committee in Full			<del></del>
Committee To Re-Elect Judge Maynard			
Full Name			Registration Number, if PAC
Chase Bank			Tregistration Transcet, in Tree
Address	Type*		M D Y Amount
PO Box 659754	IN		0 2 2 2 1 1 \$100.00
City San Antonia	Stale TX	Zip Code 78265	Form (Cash, Check, etc.) cash(see attach
Full Name			Registration Number, if PAC
Loans Transfer From Form 31-C		' L	
Address	Type* RE		M D Y Amount \$150.00
City	State -	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name		· · · · · · ·	Registration Number, if PAC
Address	Type*	A 94.71	M D Y Amount
	RE		<u> </u>
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
City	RE State	Zip Code	Form (Cash, Check, etc.)
	ОН		
Full Name		:	Registration Number, if PAC
Address	Type*		M D Y Amount
	RE	7. 0	
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name		i	Registration Number, if PAC
Address	Туре*	(	M D Y Amount
	RE	and the second second	
Спу	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	M D Y Amount
	RE	6 / 6 m #	
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
Cin.	RE State	Zip Code	Form (Cash, Check, etc.)
City	OH	Zip Code	Total (cash, choos, clos)

250.00

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.