Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full Togghove for Bottor Schools								
Teachers for Better Schools				ion XI .	or if r			
Full Name Eifth Third Port			Registration Number, if PAC					
Fifth Third Bank	Т		1 1	- T	1/	Amount		
Address C20000	Type*		M	D D		Amount	0.70	
P.O.Box 630900	I N	Zie Cod-	1.2		20:09		0.60	
City	_ тт	Zip Code	1	sh,Check				
Cincinnati	OH	43205		Direct Deposit Registration Number. if PAC				
Full Name			Kegistrat	ıon Numl	oer, if PA	C		
Fifth Third Bank	492 4		<u> </u>	**		-		
Address C20000	Type*		M	D 7	1	Amount	0.50	
P.O.Box 630900	I N	7'. 6.5	0 1	27	20:10		0.59	
City	_ 77	Zip Code	1	Form(Cash,Check,etc)				
Cincinnati	O H	43205		Direct Deposit				
Full Name				Registration Number, if PAC				
Fifth Third Bank	795 -7		 	r~	, , , , , , , , , , , , , , , , , , ,	Γλ		
Address R. (20000	Type*		M	D 1	Y 20:40	Amount	0.45	
P.O.Box 630900	I N	Zin Cod:	0 2		20 10		0.65	
City		Zip Code	1	sh,Check				
Cincinnati	O H	43205	Direct Deposit Registration Number, if PAC			C		
Full Name Fig. 1. This at December 1.				non Numl	oer, if PA	C		
Fifth Third Bank	elgen at-		<u> </u>	r	177	X		
Address C20000	Type*		М	D	Y	Amount	0.00	
P.O.Box 630900	I N	Zin C. I	0 3		20 10		0.86	
City		Zip Code 43205	,	sh,Check	' '			
Cincinnati	O H		ct De		C			
Full Name				aon Numi	ber, if PA			
Address	Туре*		М	D	Y	Amount		
23441658	rype"		141	ر _ا	'	AMOUR		
City	Ctot-	Zin Code	Eoro-(C	ch Charl	eto)			
City	State	Zip Code	Form(Cash,Check,etc)					
Full Name				Panistration Number of PAC				
run Name				Registration Number, if PAC				
Address	Type*		M	D	Y	Amount		
munico	rype.		!v1		'	z mount		
City	State	Zin Code	Form/C-	sh,Check	etc)			
City	State	Zip Code	p onn(Ca	ы, спеск	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Full Name				Pagistration Number if PAC				
Full Name			Registration Number, if PAC					
Address	Type*		М	D	Y	Amount		
/ radi 055	rype.		171	"	1	, anount		
City	State	Zip Code	Form(C)	sh,Check	etc)			
City	State Zip Code		L'orni(Ca	ы,спеск	(,0(0)			
Full Name			Raniation.	Projection Number & DAC				
run Name				Registration Number, if PAC				
Address	Tymak		М	Б	Y	Amount		
Address	Type*		iVI	D	I I	Amount		
Cir.		Zin Code	Ear. / 0	els Ct.	l ata'			
City	State	State Zip Code		ish,Check	(,010)			

SA for the sale of committee assets, or LN for payments received on a loan made.

Page Total \$ 2.70

^{*} 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, place the letters IN for any investment or interest income earned by the committee,