Statement of Other Income

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Prescribed by Secretary of State 2/01

Name of Committee in Full			
Committee To Re-elect Lou Goorey			
Full Name		Registration Number, if PAC	
The Guernsey Bank			
Address	Type*		M D Y Amount 0 9 3 0 0 9 \$0.01
City	State	Zip Code	Form (Cash, Check, etc.)
Worthington	OH	43085	/
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State	Zip Code	Form (Cash, Check, etc.)
Full Name	OH		
run Name			Registration Number, if PAC
Address	Type*		M D Y Amount
	RE		
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name	UFI		Registration Number, if PAC
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Address	Type*		M D Y Amount
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C.I.y	OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*		M: D. Y: Amount
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City	State	Zip Code	Form (Cash, Check, etc.)
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Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
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City	State	Zip Code	Form (Cash, Check, etc.)
Full Name	ОН		Registration Number, if PAC
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Address	Type*		M D Y Amount
City	RE _	7: 0.1	
ony .	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name	UII		Registration Number, if PAC
A23			
Address	Type*		M D Y Amount
Dity	RE State	Zip Code	Form (Cash, Check, etc.)
	ОН		

0.01

^{*} 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.