

## Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee To Re-elect Lou Goorey</b>							
Full Name <b>The Guernsey Bank</b>				Registration Number, if PAC			
Address	Type*		M	D	Y	Amount	
	IN		0	9	3	0	\$0.01
City	State	Zip Code	Form (Cash, Check, etc.)				
Worthington	OH	43085					
Full Name				Registration Number, if PAC			
Address				M	D	Y	Amount
City	State	Zip Code	Form (Cash, Check, etc.)				
	OH						
Full Name				Registration Number, if PAC			
Address				M	D	Y	Amount
City	State	Zip Code	Form (Cash, Check, etc.)				
	OH						
Full Name				Registration Number, if PAC			
Address				M	D	Y	Amount
City	State	Zip Code	Form (Cash, Check, etc.)				
	OH						
Full Name				Registration Number, if PAC			
Address				M	D	Y	Amount
City	State	Zip Code	Form (Cash, Check, etc.)				
	OH						
Full Name				Registration Number, if PAC			
Address				M	D	Y	Amount
City	State	Zip Code	Form (Cash, Check, etc.)				
	OH						
Full Name				Registration Number, if PAC			
Address				M	D	Y	Amount
City	State	Zip Code	Form (Cash, Check, etc.)				
	OH						
Full Name				Registration Number, if PAC			
Address				M	D	Y	Amount
City	State	Zip Code	Form (Cash, Check, etc.)				
	OH						

\* 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.