

Statement of Other Income

Prescribed by Secretary of State 2/01

| Name of Committee in Full | | | | | Registration Number, if PAC | | | |
|---------------------------|---------|-------|-------|----------|-----------------------------|---|---|--------|
| M'INTOSH for JUDGE | | | | | | | | |
| Full Name | Address | Type* | State | Zip Code | M | D | Y | Amount |
| | | RE | OH | | | | | |
| City | | | | | Form (Cash, Check, etc.) | | | |
| Full Name | Address | Type* | State | Zip Code | M | D | Y | Amount |
| | | RE | OH | | | | | |
| City | | | | | Form (Cash, Check, etc.) | | | |
| Full Name | Address | Type* | State | Zip Code | M | D | Y | Amount |
| | | RE | OH | | | | | |
| City | | | | | Form (Cash, Check, etc.) | | | |
| Full Name | Address | Type* | State | Zip Code | M | D | Y | Amount |
| | | RE | OH | | | | | |
| City | | | | | Form (Cash, Check, etc.) | | | |
| Full Name | Address | Type* | State | Zip Code | M | D | Y | Amount |
| | | RE | OH | | | | | |
| City | | | | | Form (Cash, Check, etc.) | | | |
| Full Name | Address | Type* | State | Zip Code | M | D | Y | Amount |
| | | RE | OH | | | | | |
| City | | | | | Form (Cash, Check, etc.) | | | |
| Full Name | Address | Type* | State | Zip Code | M | D | Y | Amount |
| | | RE | OH | | | | | |
| City | | | | | Form (Cash, Check, etc.) | | | |
| Full Name | Address | Type* | State | Zip Code | M | D | Y | Amount |
| | | RE | OH | | | | | |
| City | | | | | Form (Cash, Check, etc.) | | | |

* 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.