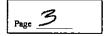
Statement of Other Income



Prescribed by Secretary of State 2/01

Name of Committee in Full Tax for Jobs PAC			
FULL PRINCIP FINNELL DOPSONA	loan)	Registration Number, if PAC
293 (ross/dlp Court	Type*		014 28 15 83,492 CG
City Westerville	Sta ķ e OH	Zip Code 4308	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*RE		M D Yi Amount
City	Stație OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	RE		M D Y Amount
City	Staţie OH	Zip Code	Form (Cash, Check, etc.)
Full Name Address	ni.	-	Registration Number, if PAC
City	Type*RE	Zip Code	M D Y Amount
Full Name	State OH	22p Code	Registration Number, if PAC
Address	Type*		M D Y Amount
City	RE	Zip Code	Form (Cash, Check, etc.)
Full Name	ОН		Registration Number, if PAC
Address	Type*		M D Y Amount
City	RE	Zip Code	Form (Cash, Check, etc.)
Full Name	ОН		Registration Number, if PAC
Address	Type*		M D Y Amount
City	RE _	Zip Code	Form (Cash, Check, etc.)
Full Name	ОН		Registration Number, if PAC
Address	Type*		M D Y Amount
City	RE Starke	Zip Code	Form (Cash, Check, etc.)
	ОН		

#3, 497, 00 0-00 Page Total \$

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.