Page	2
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Statement of Other Income

Prescribed by Secretary of State 2/01

V 70 1 1 1			· <u>-</u> -						
Name of Committee in Full COMMITTEE TO ELECT ED JOHNSTON	т								
Full Name				In a salatan	dan XC		10		
DWARD JOHNSTON					Registration Number, if PAC				
Address	Type*	T .	* ***	M	D	Y	Amount		
430 CRANDALL DRIVE	$L \mid N$		·	1 2	1 6	1 1			
City WORTHINGTON	State H	Zip Code	43085		ish,Check				
Full Name				Registration Number, if PAC					
Address	Type*			M	D	Y	Amount		
							Timbali		
City	State	Zip Code		Form(Cash,Check,etc)					
Full Name					Registration Number, if PAC				
1									
Address	Type*		A STATE OF THE STA	М	D	Y	Amount		
City	State	Zip Code		Form(Ca	ish,Chec	c,etc)			
Full Name		<u> </u>		Registration Number, if PAC					
			<u>_</u>						
Address	Type*		2. 多种的人	М	D	Y	Amount		
City	State	7:- C- 1-		F. (C	1 01 1		V986		
City	State	Zip Code	·	Form(Cash,Check,etc)					
Full Name			:	Registra	tion Nun	ber, if P	NC .		
Address	Type*	24 (11577	M	D	Y	Amount		
City	State	Zip Code	1	Form(Cash,Check,etc)					
Full Name	'	-1	1	Registration Number, if PAC					
Address	T +		E CONTRACTOR OF THE STATE OF TH	172	T	 .			
Audices	Type*		THE STATE OF THE S	M 	D	Y	Amount		
City	State	Zip Code	•	Form(Ca	ish,Chec	k,etc)			
Full Name	11	<u> </u>		Registration Number, if PAC					
Address	Type*		on some	М	D	Y	Amount		
	.,,,,,,				Ĭ	 	7 Thouse		
City	State	Zip Code		Form(Ca	ash,Chec	k,etc)			
Full Name		.1		Registration Number, if PAC					
Address	Type*	100	The last contract of	M		Y	Amount		
						<u> </u>			
City	State	Zip Code	i	Form(Ca	ish,Checl	c,etc)			

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

Page Total \$ 1.728.98

^{*} 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 carned by the committee,