31-A-2
R.C. 3517.10(B)

Page 1

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full: Groveport Madison Committee for Better Schools

Full Name	Address	Type*	City	State	Zip Code	Registration Number, if PAC	M	D	Y	Amount	Form(Cash,Check,etc)
The Huntington National Bank	PO Box 1558 EA1W37		Columbus	OH	43216		05	06	19	0.48	cash
The Huntington National Bank	PO Box 1558 EA1W37		Columbus	OH	43216		06	04	19	0.31	cash

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

Page Total $ 0.79