



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee Committee to Elect George W. Leach Judge			
Full Name of Contributor George W. Leach		Registration Number, if PAC	
Street Address 2461 Sherwood Rd.	Type* Loan Payments Received	Date (MM/DD/YYYY) 12/07/2019	Form (Cash, Check, etc.) Check
City Bexley	State OH	Zip Code 43209	Amount 1,000.00
Full Name of Contributor George W. Leach		Registration Number, if PAC	
Street Address 2461 Sherwood Rd.	Type* Loan Payments Received	Date (MM/DD/YYYY) 12/17/2019	Form (Cash, Check, etc.) Check
City Bexley	State OH	Zip Code 43209	Amount 10,000.00
Full Name of Contributor Huntington Bank		Registration Number, if PAC	
Street Address 600 S. High St.	Type* Refund	Date (MM/DD/YYYY) 12/30/2019	Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43215	Amount 50.00
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount

* 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.

Page Total \$ 11,050.00