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Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee				
Bexley Citizens for Smooth Streets				
Full Name of Contributor			Registration Number, if PAC	
Benjamin Kessler				
Street Address	Type*	Date (MM/D	D/YYY)	Form (Cash, Check, etc.)
2555 Bryden Rd	Refund		09/12/18	
City	State	Zip Code		Amount
Bexley	он	43209		1284.07
Full Name of Contributor			Registration Number	er, if PAC
Street Address	Type*	Date (MM/D	L D/YYYY)	Form (Cash, Check, etc.)
	Refund		,	
City	State	Zip Code		Amount
	он			
Full Name of Contributor			Registration Number, if PAC	
Street Address	Type*	Date (MM/D	D/YYYY)	Form (Cash, Check, etc.)
	Refund			
City	State	Zip Code	-	Amount
	он			
Full Name of Contributor			Registration Number, if PAC	
Street Address	Type*	Date (MM/D	(Cash, Check, etc.)	
	Refund			
City	State	Zip Code		Amount
	ОН			
Full Name of Contributor			Registration Number, if PAC	
Street Address	Type*	Date (MM/D	D/YYYY)	Form (Cash, Check, etc.)
	Refund			
City	State	Zip Code	Zip Code Amount	
	он			

* 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 \$	1284.07	
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