

# Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>FRIENDS OF JOHN O'GRADY</b>						Registration Number, if PAC		
Full Name <b>VOIDED CHECK #2536</b>						Amount		
Address		Type* <b>R   E</b>		M   D   Y <b>0   6   1   9   0   9</b>		<b>525.00</b>		
City		State		Zip Code		Form(Cash,Check,etc) <b>CHECK</b>		
Full Name <b>VOIDED CHECK #2489</b>						Registration Number, if PAC		
Address		Type* <b>R   E</b>		M   D   Y <b>1   2   1   8   0   8</b>		<b>48.00</b>		
City		State		Zip Code		Form(Cash,Check,etc) <b>CHECK</b>		
Full Name <b>FIFTH THIRD BANK</b>						Registration Number, if PAC		
Address		Type* <b>R   E</b>		M   D   Y <b>1   2   2   2   0   9</b>		<b>23.00</b>		
City		State		Zip Code		Form(Cash,Check,etc)		
Full Name <b>FIFTH THIRD BANK</b>						Registration Number, if PAC		
Address		Type* <b>R   E</b>		M   D   Y <b>1   2   2   2   0   9</b>		<b>25.00</b>		
City		State		Zip Code		Form(Cash,Check,etc)		
Full Name <b>FIFTH THIRD BANK</b>						Registration Number, if PAC		
Address		Type* <b>R   E</b>		M   D   Y <b>1   2   2   4   0   9</b>		<b>8.00</b>		
City		State		Zip Code		Form(Cash,Check,etc)		
Full Name <b>FIFTH THIRD BANK</b>						Registration Number, if PAC		
Address		Type* <b>R   E</b>		M   D   Y <b>1   2   2   4   0   9</b>		<b>8.00</b>		
City		State		Zip Code		Form(Cash,Check,etc)		
Full Name						Registration Number, if PAC		
Address		Type*		M   D   Y		Amount		
City		State		Zip Code		Form(Cash,Check,etc)		
Full Name						Registration Number, if PAC		
Address		Type*		M   D   Y		Amount		
City		State		Zip Code		Form(Cash,Check,etc)		

\* 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.