Page	1

## **Statement of Other Income**

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Citizens for Bonnie Michael							
Full Name		****	Dogistes	tion Nun	ahan iC	DAC	
Guernsey Bank			Registra	ITION (ACT)	ilber, n	PAC	
Address	Type*			T 5	1 0	1.	
P.O. Box 1040		•	M	D	Y	Amount	0.40
City	I N	7: 0 1	1 2			U	3.49
1 *	State	Zip Code	Form(C	ash,Chec	k,ctc)		
Worthington	OH	43085					
Full Name			Registra	tion Nun	nber, if	PAC	
				_			
Address	Type*		М	D	Y	Amount	
City	State	Zip Code	Form(Ca	ash,Chec	k,etc)		
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Full Name		* ***	Registra	tion Nun	nber, if	PAC	
			ł				
Address	Type*		М	D	Y	Amount	
	"1		1	L	lт		
City	State	Zip Code	Form(C	ash,Chec	k etc)		
		inp code	l'onn(c)	2311,01100	к,ого,		
Full Name	l	<u> </u>	Dogisten	tion Man	اعتسماء	DAC	
Tun realite			Registra	tion Nun	ieer, ii	PAC	
Address				T =	1	<del></del>	
Address	Type*		М	D	Y	Amount	
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City	State	Zip Code	Form(Ca	ash,Chec	k,etc)		
Full Name		*	Registra	tion Nun	iber, if	PAC	
Address	Type*		М	D	Y	Amount	
				1 1			
City	State	Zip Code	Form(Ca	ash,Chec	k,ctc)		
Full Name	····· t		Registra	tion Nun	ber, if	PAC	
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Address	Type*		М	D	Y	Amount	
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City	State	Zip Code	Form(C)	ash,Chec	k ata)		
	I	Zip Code	Politica	asii,Chec	K,CIC)		
Full Name			Davis s		1 '0'	346	
rui vanc			Registra	tion Num	iber, if	PAC	
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Address	Type*		M	D	Y	Amount	
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City	State	Zip Code	Form(Ca	sh,Checl	k,etc)		
Full Name		<del></del>	Registra	tion Num	iber, if l	PAC	
Address	Type*		М	D	Y	Amount	
	1 1				$\mathbf{I}$		
City	State	Zip Code	Form(Ca	sh.Checl	k.etc)		
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		<u> </u>					

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

Page Total \$	3.49

<sup>\*</sup> 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,