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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Teachers for Better Schools							
Full Name of Contributor			Registra	ation Nur	nber, if PA	AC .	
Kevin Arway						ic	
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Chec	k etc.)
643 Wilson Ave.		us City Schools		Cash			м, осо.,
City	State	Zip Code	М	D	ΙΥ	Amount	
Columbus	ОН	43205	1 0	ļ	20.09		2.00
Full Name of Contributor		1 30200			nber, if PA		4.00
Patrick Crawford				itron .	1002,	.C	
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Checl	v etc.)
2839 Kensington Place	1	us City Schools				Cash	K, Cic.,
City	State	Zip Code	М	D	ΙΥ	Amount	············
Columbus	OH	43202	1^{10}		20 09		1.00
Full Name of Contributor		10202	The state of the s	and of Common States and States	20 09 nber, if PA	Maria and a superior of the su	1.00
Cynthia Rothackerr			Negana	dion rum	iber, n i r	.C	
Street Address	Employer/Occup:	ation/Labor Organization*				In Charle	•
2270 Salbuck Ave.	1	us City Schools				Form (Cash, Checl	k, etc.)
City	State	US City Schools Zip Code	T NA	T	т ,, -	Cash	
Hilliard	OH	1 '	M	D	Y	Amount	4 00
F11111ara	10 11	43026	1 0		20:09		1.00
Carolyn Lake			Registra	tion Num	nber, if PA	С	
Street Address	In/Casum.						
	1	ation/Labor Organization*				Form (Cash, Check	k, etc.)
260 West Como Ave.	*****	us City Schools				Cash	
Columbus	State	Zip Code	М	D	1	Amount	
Columbus Full Name of Contributor	10 H	43202	1 0	and the second second	20.09		1.00
			Registra	tion Num	nber, if PA	C	200000000000000000000000000000000000000
Susan Flaherty							
Street Address	1	ation/Labor Organization*				Form (Cash, Check	k, etc.)
4550 Summit Ridge Dr.		us City Schools				Cash	
City		Zip Code	М	D	1 8	Amount	
Columbus	O H	43220	1 0	1 5	20 09		1.00
Full Name of Contributor	######################################	(an a reason and a	Registra		ber, if PA		
Catherine Griffin							
Street Address	1	ation/Labor Organization*				Form (Cash, Check	k, etc.)
9876 Morris Dr.	Columbi	us City Schools				Cash	
City	State	Zip Code	М	D		Amount	
Dublin	OH	43017	1_{10}	1 5	20:09		1.00
Full Name of Contributor			Registra	tion Num	ber, if PA	C	**-
Valerie Cummings							
Street Address	Employer/Occupa	ntion/Labor Organization*	_L			Form (Cash, Check	etc.)
2200 Belcher Dr.	1	us City Schools				Cash	ι, οισ.,
City		Zip Code	М	D	Y	Amount	
Columbus	OH	43224	1 0		20 09		1.00
Full Name of Contributor					120.091 ber, if PA(CONTROL OF THE PARTY OF THE PAR	1.00
Brent Greene				101.	001,		
Street Address	Employer/Occupa	ttion/Labor Organization*				Form (Cash, Check	etc.)
256 Cross Wind Dr.	1	ıs City Schools				Check	., ()
City		Zip Code	M	D	Υ	Amount	
Westerville	ОН	43081	1 3		20:09		75.00
			J. U ;	1 1 0,	14U U /8		10.00

Page '	Total	\$	83.00
Page	1 0131	.5	83.00

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]