

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full TEACHERS FOR BETTER SCHOOLS									
Full Name of Contributor REBECCA J FERGUSON							Registration Number, if PAC		
Street Address 5766 BUCK RUN DR				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City COLUMBUS				State O H	Zip Code 43213	M 0 3	D 2 9	Y 1 1	Amount 50.00
Full Name of Contributor IDA A PATACCA							Registration Number, if PAC		
Street Address 708 OVERLOOK DR				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City COLUMBUS				State O H	Zip Code 43214	M 0 3	D 2 9	Y 1 1	Amount 30.00
Full Name of Contributor KENYA N DAVIS							Registration Number, if PAC		
Street Address 6909 IDLELEA DR				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City REYNOLDSBURG				State O H	Zip Code 43068	M 0 3	D 2 9	Y 1 1	Amount 26.00
Full Name of Contributor LEOTHA F TATE							Registration Number, if PAC		
Street Address PO BOX 248143				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City COLUMBUS				State O H	Zip Code 43224	M 0 3	D 2 9	Y 1 1	Amount 26.00
Full Name of Contributor VERONICA M BRYANT							Registration Number, if PAC		
Street Address 613 RIDENOUR RD				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City GAHANNA				State O H	Zip Code 43230	M 0 3	D 2 9	Y 1 1	Amount 25.00
Full Name of Contributor LINDSEY M MATHEWS							Registration Number, if PAC		
Street Address 110 MIDLAND AVE				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City CARDINGTON				State O H	Zip Code 43315	M 0 3	D 2 9	Y 1 1	Amount 20.00
Full Name of Contributor LORETTA A STOFOLIK							Registration Number, if PAC		
Street Address 10501 WATKINS RD SW				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City PATASKALA				State O H	Zip Code 43062	M 0 3	D 2 9	Y 1 1	Amount 50.00
Full Name of Contributor EZETTA I MURRAY							Registration Number, if PAC		
Street Address 4740 NORTHTOWNE BLVD				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City COLUMBUS				State O H	Zip Code 43229	M 0 3	D 2 9	Y 1 1	Amount 100.00
Full Name of Contributor KAREN S HARRIS							Registration Number, if PAC		
Street Address 5369 WOLF RUN DR				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City GAHANNA				State O H	Zip Code 43230	M 0 3	D 2 9	Y 1 1	Amount 100.00

* 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 also appear. [R.C. 3517.10(B)(4)]