31-A R.C. 3517.10

Statement of Contributions Received

Page 1

Prescribed by Secratary of State 03/05

Name of Committee in Full TEACHERS FOR BETTER SCHOOLS										
Full Name of Contributor	Registration Number.							ber. if F	PAC	
Columbus Board of Education - Payroll Deduction										
Street Address	Employer/Occupation/Labor Organization					i				Form (Cash, Check, etc.)
270 E.State St.										Payroll Deduction
City Columbus	State		Zip Code 43215	М		D Y		Y	Amount 1,940.00	
Columbus	0	Н	70210	0	4	2	2	1	9	1,540.00
Full Name of Contributor	Registration Number. if								PAC	
Columbus Board of Education - Payroll Deduction										
Street Address	Employer/Occupation/Labor Organization								Form (Cash. Check. etc.)	
270 E.State St.							Payroll Deduction			Payroll Deduction
City Columbus	Sta	ate	Zip Code 43215	١	И	Į į)		Y	Amount 1,917.00
Coldinada	0	Н	40210	0	5	0	6	1	9	1,017.00
Full Name of Contributor	or Registration Number.									PAC
Columbus Board of Education - Payroll Deduction										
Street Address	Employer/Occupation/Labor Organization									Form (Cash. Check. etc.)
270 E.State St.										Payroll Deduction
City Columbus	Sta	State Zip Code 43215			М		D Y		Υ	Amount 1,921.50
Columbus	0	Н	43213	0	5	2	0	1	9	1,321.00
Full Name of Contributor	Registration Number. if								ber. if F	PAC
Columbus Board of Education - Payroll Deduction										
Street Address	Employer/Occupation/Labor Organization								Form (Cash, Check, etc.)	
270 E.State St.										Payroll Deduction
City Columbus	Sta	State Zip Cod 4321		M		DY		Y	Amount 1,916.00	
Columbus	0	Н	70210	0	6	0	3	1	9	1,010.00

* 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