## Page 1

## Statement of Contributions Received

Prescribed by Secratary of State 03/05

	DV Secratary or S	iale oc			:							
Name of Committee in Full TEACHERS FOR BETTER SCHOOLS						Regist	tration	Numb	er. if P	AČ		
Full Name of Contributor							Registration Number. if PAC					
Columbus Board of Education - Payroll Deduction	Employer/Occupation/Labor Organization						1				, Check, etc.)	
Street Address	Employe	517000	apano, reado						ļ	Payroll D	eduction	
270 E.State St.	State	1 2	Zip Code	N	vi .	D	- 1	<del></del>	, –	Amount	1,911.00	
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Full Name of Contributor						Reais	stration	Numi	oer. if P	AC		
Columbus Board of Education - Payroll Deduction		/O	and about about	or Orga	nizatio	<u> </u>				Form (Cash	. Check, etc.)	
Street Address	Employer/Occupation/Labor Organization					Į.				Payroll Deduction		
270 E.State St.	State	<del>. T</del>	Zip Code	τ	M	D		,	Y	Amount		
City Columbus			43215	0	7	0	1	1	9	200	1,878.50	
Full Name of Contributor						Regi	stratio	n Num	ber, if F	-AC		
Columbus Board of Education - Payroll Deduction				a. C	onizot					Form (Cash	n, Check. etc.)	
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Full Name of Contributor												
Columbus Board of Education - Payroll Deduction	Employer/Occupation/Labor Organization									Form (Cas	h. Check. etc.)	
Street Address										Payroil	Deduction	
270 E.State St.	Stat	e	Zip Code	T	М	T 1	D	T	Υ	Amount	1,867.50	
City Columbus	0	н	43215	0	7	2	9	1	9	700	1,007.00	
Full Name of Contributor						Red	istratio	on Nur	nber. if	PAC		
Columbus Board of Education - Payroll Deduction	La L					00				Form (Cas	sh. Check. etc.)	
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Columbus Board of Education - Payroll Deduction	Empl	over/C	ccupation/La	bor Or	oaniza	tion				1	sh. Check. etc.)	
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Columbus	0	Н	43213		) [8		_i		9			
Full Name of Contributor						Re	oistrat	ion Nu	ımber.	if PAC		
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Street Address	Employer/Occupation/Labor Organizat					ation					l Deduction	
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Columbus O H					0 9				umber.			
Full Name of Contributor						1	Jeji d		,	<del>-</del>		
Columbus Board of Education - Payroll Deduction	Fmr	olover/	Occupation/L	abor C	)rganiz	ation				Form (C	ash. Check, etc.)	
Street Address	Employer/Occupation/Labor Organizat									Payro	II Deduction	
270 E.State St.	s	tate	Zip Code		М		Ď	$\neg$	Y	Amount	1,829.5	
City Columbus	0	H	43215	- 1	0	9 2	2   3	3	1   !	9		
Outilibus		1 7										

<sup>\*</sup> 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