

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full TEACHERS FOR BETTER SCHOOLS															
Full Name of Contributor Columbus Board of Education - Payroll Deduction								Registration Number, if PAC							
Street Address 270 E.State St.				Employer/Occupation/Labor Organization					Form (Cash, Check, etc.) Payroll Deduction						
City Columbus				State O   H		Zip Code 43215		M 1   0		D 2   2		Y 1   8		Amount 1,909.00	
Full Name of Contributor Columbus Board of Education - Payroll Deduction								Registration Number, if PAC							
Street Address 270 E.State St.				Employer/Occupation/Labor Organization					Form (Cash, Check, etc.) Payroll Deduction						
City Columbus				State O   H		Zip Code 43215		M 1   1		D 0   5		Y 1   8		Amount 1,948.00	
Full Name of Contributor Columbus Board of Education - Payroll Deduction								Registration Number, if PAC							
Street Address 270 E.State St.				Employer/Occupation/Labor Organization					Form (Cash, Check, etc.) Payroll Deduction						
City Columbus				State O   H		Zip Code 43215		M 1   1		D 1   9		Y 1   8		Amount 1,942.50	
Full Name of Contributor Columbus Board of Education - Payroll Deduction								Registration Number, if PAC							
Street Address 270 E.State St.				Employer/Occupation/Labor Organization					Form (Cash, Check, etc.) Payroll Deduction						
City Columbus				State O   H		Zip Code 43215		M 1   2		D 0   3		Y 1   8		Amount 1,942.00	

\* 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