## **Statement of Contributions Received**

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Prescribed by Secratary of State 03/05

Name of Committee in Full TEACHERS FOR BETTER SCHOOLS										
Full Name of Contributor						Regi	stratio	Numl	ber, if F	PAC
Columbus Board of Education - Payroll Deduction										
Street Address	Employer/Occupation/Labor Organization					1				Form (Cash. Check. etc.)
270 E.State St.										Payroll Deduction
Columbus	State Zip Code 43215			١ ١	И	DY			Y	Amount 1,909.00
	0   1	Н	40210	1	0	2	2	1	8	1,303.00
Full Name of Contributor	Registration Number, if							ber, if P	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	State	ate Zip Code M D 43215			,	7	Amount 1,948.00			
Columbus	0   1	н	40213	1	1	0	5	1	8	1,940.00
Full Name of Contributor Registration Number. if									ber. if P	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 M 43215					D Y				Amount 1,942.50
Columbus	0   1	Н	43213	1	1	1	9	1	8	1,942.50
Full Name of Contributor	Registration						stratio	n Numi	ber. if P	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	State			N	И	D		Y	Amount 1,942.00	
Columbus	0   1	н	43215	1	2	0	3	1	8	1,542.00
				_	_	_				

Page Total \$ 7,741.50

<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