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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full	-			No.			
Teachers for Better Schools							
Full Name of Contributor			D				
Columbus City Schools/ Columbus Board of Education		action	Registration Number, if PAC				
Street Address							
		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
270 E. State St.		Education		,		Payroll Deduction	
Calman	State	Zip Code	М	D	Y	Amount	
Columbus Full Name of Contributor	O H	43205	0 8	Married Williams	20.08		868.44
) 1 (TI		Registra	tion Num	ber, if PA	C	
Columbus City Schools/ Columbus I					No. 100 100 100 100 100 100 100 100 100 10		
Street Address	1 ' '	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
270 E. State St.		Education				Payroll Deduction	
City	State	Zip Code	М	D	Y	Amount	
Columbus	O H	43205	0 8	1 8	20 08		863.44
Full Name of Contributor			Registration Number, if PAC				
Ruth Annabelle Van Meter							
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1500 Fairview Ave. Apt. B	Columb	Columbus City Schools				Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	O H	43212	0.8	2 6	20:08		50.00
Full Name of Contributor			Registration Number, if PA				
Juanita J. Smith							
Street Address	Employer/Occupa	ation/Labor Organization*		Antonia elistitati etti etti etti etti etti etti ett		Form (Cash, Checl	k, etc.)
5981 Stillponds Pl.	Columb	us City Schools				Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	ОН	43228	0.8	2:6	20.08		50.00
Full Name of Contributor		·	THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSONS ASSESSED.	ion Numb		C	
Kathryn Conlkin							
Street Address	Employer/Occupa	ation/Labor Organization*				Form (Cash, Checl	k. etc.)
541 Catawba Ave.	Columbi	us City Schools				Check	
City	State	Zip Code	М	D	Y	Amount	
Westerville	ОН	43081	0.8	2.6	20.08		50.00
Full Name of Contributor			and the second property of the second	ion Numb			00.00
Columbus City Schools/ Columbus B	oard of Edu	cation			,		
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)						
270 E. State St.	- 1	Education				Payroll D	
City	·····	Zip Code	М	D	Y	Amount	reductio
Columbus	OH	43205	1 1	0 2	8		868.44
Full Name of Contributor		10.00		ion Numb			000.44
Pamela L. Ennis			, and an an		,		
Street Address	Employer/Occupa	ntion/Labor Organization*				Form (Cash, Check	. ata \
3567 Delport Way		The state of the s				, ,	ι, σιο.)
City City	State	Zip Code	М	D	Y	Check	
Columbus	OH	43232-3603				Amount	F0.00
Full Name of Contributor		1 40202-0000	0 · 9	$0\ 4$ ion Numb	20 08		50.00
Richard Logan			Registrat	ion Numo	ei, ii rac	~	
Street Address	Employar/Occurs	tion/Labor Organization*				r (C.) . C'. :	
929 E. Broad Street	Linproyer/Occupa	mon/Panor Organization.			and the state of t	Form (Cash, Check	t, etc.)
City	State	Zip Code	7	Б 1		Check	
Columbus		43205	M	D	1	Amount	05.00
Communa	OH	43203	[0.9]	0.4	<i>20:08</i>		25.00

2,825.32

^{*} 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 appear. [R.C. 3517.10(B)(4)]