Statement of Contributions Received

Prescribed by Secratary of State 03/05

Name of Committee in Full TEACHERS FOR BETTER SCHOOLS							_			
ull 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	
City Columbus	State	Zip Code 43215	1	М	ļ	D	Y		Amount 2,557.56	
	ОН		0	6	0	6	1	1		
Full Name of Contributor Registratio								er, if P	PAC	
RUTH A VAN METER										
Street Address	Employer/Occupation/Labor Organization								Form (Cash, Check, etc.)	
1500 FAIRVIEW AVE APT B	COLUMBUS CITY SD State Zip Code M					<u> </u>	1		Check	
COLUMBUS	O I H	Zip Code 43212			۷ (,	70.00	
Full Name of Contributor	U I		0	6	0	8	\ \ \ \ \	1		
Full Name of Contributor Registration Number, if PAC JANICE T MCDONALD										
Street Address	Employer#	Sccupation/Lab	or Oreg	anization					Form (Cash. Check. etc.)	
2948 KERRWOOD DR	Employer/Occupation/Labor Organization							Check		
City	COLUMBUS CITY SD State Zip Code M					5	Y		Amount	
COLUMBUS	ОІН	43231	0	6	0	8	1 1	1	75.00	
Full Name of Contributor	1 9			1 0			n Numb		AC	
Full Name of Contributor Registration Number, if PAC SUSAN M BAUERLE										
Street Address	Employer/Occupation/Labor Organization							Form (Cash, Check, etc.)		
5758 ASPENDALE DR	COLUMBUS CITY SD								Check	
City	State Zip Code M				I D Y				Amount	
COLUMBUS	ОН	43235	٥	6	0	8	1	1	30.00	
Full Name of Contributor				1	Real	istration	i Numb	er, if P	AC	
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	Zip Code 43215		М	[,	Y		Amount 2 561 00	
- Colombus	О Н	43213	0	6	2	0	1	1	2,561.06	
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	
Cily Columbus	State	Zip Code 43215	ĺ	M)		. 1	Y		Amount 2,394.56	
	ОН		0	7	0	5	1	1		
Full Name of Contributor					Requ	stration	n Numbe	er, if P.	AC	
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	Zip Code 43215		M _ [. 1	Y		Amount 2,394.56	
Full Name of Contributor	ОН		0	7	1	8	1	1		
Full Name of Contributor					Regi	stration	n Numbe	er, if P	AC	
JOHN T CONEGLIO Street Address	I Employee'	leaventine (st.	vr ○						Form (Cash Chart ata)	
1824 HESS BLVD	Employer/Occupation/Labor Organization COLUMBUS CITY SD							l	Form (Cash, Check, etc.)	
City City	State Zip Code M) T			Check	
COLUMBUS	0 H	43212	0	" 7	2	8	' 1	1	25.00	
	J 1		٧.	'	۷	U	'	'		

^{*} 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 also appear. [R. C. 3517,10(B)(4)]