

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full TEACHERS FOR BETTER SCHOOLS									
Full Name of Contributor DYANN A TAYLOR							Registration Number, if PAC		
Street Address 2747 BERWICK BLVD				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43209	M 0 3	D 3 1	Y 1 1	Amount 35.00		
Full Name of Contributor CAROL J MOSS							Registration Number, if PAC		
Street Address 600 THOMAS RD NE				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City BREMEN		State O H	Zip Code 43107	M 0 3	D 3 1	Y 1 1	Amount 50.00		
Full Name of Contributor BARBARA J RENEE PRESTON							Registration Number, if PAC		
Street Address 7649 YOSEMITE DR				Employer/Occupation/Labor Organization UNAVAILABLE				Form (Cash, Check, etc.) Check	
City WORTHINGTON		State O H	Zip Code 43085	M 0 3	D 3 1	Y 1 1	Amount 26.00		
Full Name of Contributor EUNEVA M DAYS							Registration Number, if PAC		
Street Address 3424 BRENDAN DR				Employer/Occupation/Labor Organization UNAVAILABLE				Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43221	M 0 3	D 3 1	Y 1 1	Amount 20.00		
Full Name of Contributor SHELLEY L HALL							Registration Number, if PAC		
Street Address 2109 HARWITCH RD				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43221	M 0 3	D 3 1	Y 1 1	Amount 50.00		
Full Name of Contributor MURLENE N JOHNSON							Registration Number, if PAC		
Street Address 5740 ECHO CT				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City GAHANNA		State O H	Zip Code 43230	M 0 3	D 3 1	Y 1 1	Amount 15.00		
Full Name of Contributor DEBBY M ALLEN							Registration Number, if PAC		
Street Address 3269 ABINGDON DR				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43224	M 0 3	D 3 1	Y 1 1	Amount 50.00		
Full Name of Contributor DEANDREA D NDIRANGU							Registration Number, if PAC		
Street Address 2082 SUNSHINE PL				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43232	M 0 3	D 3 1	Y 1 1	Amount 26.00		
Full Name of Contributor SHARON L MEYER							Registration Number, if PAC		
Street Address 22081 WHITE STONE RD				Employer/Occupation/Labor Organization COLUMBUS CITY SD				Form (Cash, Check, etc.) Check	
City MARYSVILLE		State O H	Zip Code 43040	M 0 3	D 3 1	Y 1 1	Amount 26.00		

* 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 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)]

Page Total \$ 298.00