

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full TEACHERS FOR BETTER SCHOOLS							
Full Name of Contributor CAROL A PHILIP PERKINS						Registration Number, if PAC	
Street Address 4909 SOLAR DR			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City COLUMBUS			State O H	Zip Code 43214	M 0 4	D 1 4	Y 1 1
						Amount	25.00
Full Name of Contributor FRANCWAW D DUBOSE						Registration Number, if PAC	
Street Address 1287 PEGWOOD CT			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City COLUMBUS			State O H	Zip Code 43229	M 0 4	D 1 4	Y 1 1
						Amount	26.00
Full Name of Contributor AMY J TICHY						Registration Number, if PAC	
Street Address 3233 HEYSHAM DR			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City COLUMBUS			State O H	Zip Code 43221	M 0 4	D 1 4	Y 1 1
						Amount	26.00
Full Name of Contributor TANISHA R LAY						Registration Number, if PAC	
Street Address 1622 S JAMES RD			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City COLUMBUS			State O H	Zip Code 43227	M 0 4	D 1 4	Y 1 1
						Amount	20.00
Full Name of Contributor JANET B FRENCH						Registration Number, if PAC	
Street Address 2075 N 4TH ST APT B			Employer/Occupation/Labor Organization UNAVAILABLE			Form (Cash, Check, etc.) Check	
City COLUMBUS			State O H	Zip Code 43201	M 0 4	D 1 4	Y 1 1
						Amount	50.00
Full Name of Contributor Barbara B Neihoff						Registration Number, if PAC	
Street Address 186 W Weisheimer Rd			Employer/Occupation/Labor Organization UNAVAILABLE			Form (Cash, Check, etc.) Check	
City COLUMBUS			State O H	Zip Code 43214	M 0 4	D 1 4	Y 1 1
						Amount	50.00
Full Name of Contributor MARY E BERGMAN						Registration Number, if PAC	
Street Address 3698 CHARLEMONT WAY			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City CANAL WINCHESTER			State O H	Zip Code 43110	M 0 4	D 1 4	Y 1 1
						Amount	10.00
Full Name of Contributor TERESA G STONEROCK						Registration Number, if PAC	
Street Address 212 CARMEL DR			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City CHILlicoTHE			State O H	Zip Code 45601	M 0 4	D 1 4	Y 1 1
						Amount	75.00

* 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)(3)(4)]

Page Total \$ 282.00