

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full							TEACHERS FOR BETTER SCHOOLS											
Full Name Chery Wilmaier				Registration Number, if PAC														
Address 2189 BRIDLINGTON LN				Type R E				0	M	4	D	2	2	1	Y	1	Amount	1.00
City COLUMBUS				State O H	Zip Code 43229			Form (Cash, Check, etc) Cash										
Full Name Fifth Third Bank				Registration Number, if PAC														
Address PO Box 630900				Type I N				0	M	4	D	2	7	1	Y	1	Amount	0.49
City Cincinnati				State O H	Zip Code 45263			Form (Cash, Check, etc) Cash										
Full Name Fifth Third Bank				Registration Number, if PAC														
Address PO Box 630900				Type I N				0	M	5	D	2	6	1	Y	1	Amount	0.36
City Cincinnati				State O H	Zip Code 45263			Form (Cash, Check, etc) Cash										

* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received: RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.