

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full TEACHERS FOR BETTER SCHOOLS							
Full Name of Contributor Columbus Board of Education - Payroll Deduction						Registration Number, if PAC	
Street Address 270 E.State St.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Payroll Deduction	
City Columbus		State O H	Zip Code 43215	M 0 6	D 0 6	Y 1 1	Amount 2,557.56
Full Name of Contributor RUTH A VAN METER						Registration Number, if PAC	
Street Address 1500 FAIRVIEW AVE APT B			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43212	M 0 6	D 0 8	Y 1 1	Amount 70.00
Full Name of Contributor JANICE T MCDONALD						Registration Number, if PAC	
Street Address 2948 KERRWOOD DR			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43231	M 0 6	D 0 8	Y 1 1	Amount 75.00
Full Name of Contributor SUSAN M BAUERLE						Registration Number, if PAC	
Street Address 5758 ASPENDALE DR			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43235	M 0 6	D 0 8	Y 1 1	Amount 30.00
Full Name of Contributor Columbus Board of Education - Payroll Deduction						Registration Number, if PAC	
Street Address 270 E.State St.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Payroll Deduction	
City Columbus		State O H	Zip Code 43215	M 0 6	D 2 0	Y 1 1	Amount 2,561.06
Full Name of Contributor Columbus Board of Education - Payroll Deduction						Registration Number, if PAC	
Street Address 270 E.State St.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Payroll Deduction	
City Columbus		State O H	Zip Code 43215	M 0 7	D 0 5	Y 1 1	Amount 2,394.56
Full Name of Contributor Columbus Board of Education - Payroll Deduction						Registration Number, if PAC	
Street Address 270 E.State St.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Payroll Deduction	
City Columbus		State O H	Zip Code 43215	M 0 7	D 1 8	Y 1 1	Amount 2,394.56
Full Name of Contributor JOHN T CONEGLIO						Registration Number, if PAC	
Street Address 1824 HESS BLVD			Employer/Occupation/Labor Organization COLUMBUS CITY SD			Form (Cash, Check, etc.) Check	
City COLUMBUS		State O H	Zip Code 43212	M 0 7	D 2 8	Y 1 1	Amount 25.00

* 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)]