

NAME OF TEACHER (Two lines for each Name)	White or Colored	POST-OFFICE (On first line give permanent post-office; on second give temporary post-office during school term.)	Number Months Contracted for	Salary per Month	Date of Certificate	By Whom Issued	Grade of Certificate
Miss Lillie Morris	W	Round Hill	6	45 00	1917		H.S.
Miss Etta Gibson	W	Leesburg	6	45 00	1917		2 nd
Mr. Callor B. Norris	C	Leesburg	5	35 00			
Miss Mary B. Norris	C	Leesburg	5	25 00			
Miss Catherine Brown	C	Lucketts	5	35 00			
Lovettsville District							
Mr. A. D. Lyles	W	Richmond	9	125 00	1915		Coll.
Miss Frieda Johnson	W	Lovettsville	9	70 00	1915		S.N.S.
Miss Bernice Spring	W	Lovettsville	9	55 00	1917		Coll.
Miss Laura Potterfield	W	Lovettsville	8	50 00	1916		Prof.
Mr. P. S. Grove	W	Lovettsville	8	50 00	1917		1 st
Miss Winifred Potterfield	W	Lovettsville	8	50 00	1915		1 st
Mr. A. C. Myers	W	Taylorstown	8	80 00	1914		1 st
Miss Olga Kelley	W	Bluemont	8	50 00	1917		H.S.
Mr. H. C. Filler	W	Taylorstown	8	60 00	1917		1 st
Miss Mary Biser	W	Lovettsville	8	45 00	1917		2 nd
Miss Ruth Keys	W	Lovettsville	8	50 00	1913		S.N.S.
Miss Columbia Johnson	W	Lovettsville	8	50 00	1915		S.N.S.
Miss Helen Towles	W	Molusk	8	50 00	1916		S.N.S.