

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Committee to Elect Donald Schonhardt									
Full Name of Contributor BLAKE E RAFELD						Registration Number, if PAC			
Street Address 3504 COLCHESTER RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H		Zip Code 43221		M D Y 0 2 1 5 1 5		Amount 50.00	
Full Name of Contributor JEFFREY SCOTT SANDS						Registration Number, if PAC			
Street Address 4639 MOSSROCK DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD		State O H		Zip Code 43026		M D Y 0 2 1 7 1 5		Amount 125.00	
Full Name of Contributor NORMAN E MURPHY JR						Registration Number, if PAC			
Street Address 6851 HEVERLO RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City SUNBURY		State O H		Zip Code 43074		M D Y 0 2 1 2 1 5		Amount 125.00	
Full Name of Contributor SHAI COMMERCIAL REAL ESTATE LTD						Registration Number, if PAC			
Street Address 4009 COLUMBUS RD SW			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City GRANVILLE		State O H		Zip Code 43023		M D Y 0 2 1 1 1 5		Amount 125.00	
Full Name of Contributor ROCCO A ERAMO						Registration Number, if PAC			
Street Address 3670 LACON RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD		State O H		Zip Code 43026		M D Y 0 2 1 3 1 5		Amount 125.00	
Full Name of Contributor E SCOTT SONDLER						Registration Number, if PAC			
Street Address 4862 WATERSTONE WAY			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City CARMEL		State I N		Zip Code 46033		M D Y 0 1 0 6 1 5		Amount 125.00	
Full Name of Contributor JAMES P GARRISON						Registration Number, if PAC			
Street Address 5290 LOCUST HILL LN			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City DUBLIN		State O H		Zip Code 43017		M D Y 0 2 0 4 1 5		Amount 125.00	
Full Name of Contributor RONALD R SCHULTZ						Registration Number, if PAC			
Street Address 9485 CAPE WRATH DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City DUBLIN		State O H		Zip Code 43017		M D Y 0 2 0 5 1 5		Amount 125.00	

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 appear. R.C. 3517.10(B)(4)

Page Total \$ 925.00