31-A
R.C. 3517.10

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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						Registration Number, if PAC	
RICHARD P. CUMMINGS							
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)
5583 VILLA GATES DR							CHECK
City	State	Zip Code	M	D	Y		Amount
HILLIARD	OH	43026	02	21	13		100.00
Full Name of Contributor						Registration Number, if PAC	
CATHERINE CUNNINGHAM							
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)
5367 HESSLER CIRCLE							CHECK
City	State	Zip Code	M	D	Y		Amount
HILLIARD	OH	43026	02	27	13		100.00
Full Name of Contributor						Registration Number, if PAC	
MARK BERNHARDT							
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)
2063 W. LANE AVE							CHECK
City	State	Zip Code	M	D	Y		Amount
COLUMBUS	OH	43221	02	12	13		100.00
Full Name of Contributor						Registration Number, if PAC	
CHRISTOPHER ARAMO							
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)
4927 KILLARNEY COURT							CHECK
City	State	Zip Code	M	D	Y		Amount
WESTERVILLE	OH	43082	02	28	13		100.00
Full Name of Contributor						Registration Number, if PAC	
GREGORY EVANS							
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)
5654 DAVIDSON RD							CHECK
City	State	Zip Code	M	D	Y		Amount
HILLIARD	OH	43026	02	27	13		100.00
Full Name of Contributor						Registration Number, if PAC	
EDWARD P FERRIS							
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)
1959 COLLINGSWOOD RD							CHECK
City	State	Zip Code	M	D	Y		Amount
COLUMBUS	OH	43221	02	26	13		100.00
Full Name of Contributor						Registration Number, if PAC	
MATTHEW E. FERRIS							
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)
2036 BERKSHIRE RD							CHECK
City	State	Zip Code	M	D	Y		Amount
COLUMBUS	OH	43221	02	27	13		200.00
Full Name of Contributor						Registration Number, if PAC	
THOMAS A. BOLTE							
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)
522 VILLAGE DR.							CHECK
City	State	Zip Code	M	D	Y		Amount
COLUMBUS	OH	43214	02	13	13		100.00

* 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 $ 900.00