

# Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee to Elect Donald Schonhardt</b>													
Full Name of Contributor <b>GDP GROUP - KEVIN GRATHWOL</b>						Registration Number, if PAC							
Street Address <b>520 S. MAIN ST. STE 2531</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>						
City <b>AKRON</b>		State <b>O H</b>		Zip Code <b>44311</b>		M <b>0 1</b>		D <b>2 9</b>		Y <b>1 8</b>		Amount <b>125.00</b>	
Full Name of Contributor <b>GDP GROUP - SCOTT SEAMAN</b>						Registration Number, if PAC							
Street Address <b>520 S. MAIN ST. STE 2531</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>						
City <b>AKRON</b>		State <b>O H</b>		Zip Code <b>44311</b>		M <b>0 1</b>		D <b>2 9</b>		Y <b>1 8</b>		Amount <b>125.00</b>	
Full Name of Contributor <b>BUILD PAC OF CENTRAL OHIO</b>						Registration Number, if PAC							
Street Address <b>495 EXECUTIVE CAMPUS DR.</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>						
City <b>WESTERVILLE</b>		State <b>O H</b>		Zip Code <b>43082</b>		M <b>0 2</b>		D <b>0 6</b>		Y <b>1 8</b>		Amount <b>250.00</b>	
Full Name of Contributor <b>ISAAC WILES BURKHOLDER &amp; TEETOR, LLC</b>						Registration Number, if PAC							
Street Address <b>2 MIRANOVA PLACE SUITE 700</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>						
City <b>COLUMBUS</b>		State <b>O H</b>		Zip Code <b>43215</b>		M <b>0 2</b>		D <b>1 5</b>		Y <b>1 8</b>		Amount <b>625.00</b>	
Full Name of Contributor <b>WOOLPERT, INC. PAC</b>						Registration Number, if PAC							
Street Address <b>4454 IDEA CENTER BOULEVARD</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>						
City <b>DAYTON</b>		State <b>O H</b>		Zip Code <b>45430</b>		M <b>0 2</b>		D <b>0 5</b>		Y <b>1 8</b>		Amount <b>125.00</b>	
Full Name of Contributor <b>PRIME AE GROUP OF OHIO PAC</b>						Registration Number, if PAC							
Street Address <b>545 E. TOWN ST</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>						
City <b>COLUMBUS</b>		State <b>O H</b>		Zip Code <b>43215</b>		M <b>0 2</b>		D <b>1 5</b>		Y <b>1 8</b>		Amount <b>250.00</b>	
Full Name of Contributor <b>CENTRAL OHIO REALTORS PAC</b>						Registration Number, if PAC							
Street Address <b>2700 AIRPORT DR</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>						
City <b>COLUMBUS</b>		State <b>O H</b>		Zip Code <b>43219</b>		M <b>0 2</b>		D <b>0 8</b>		Y <b>1 8</b>		Amount <b>1,000.00</b>	
Full Name of Contributor <b>CONTRIBUTORS IN OFFICEHOLDERS EMPLOY - FORM 31-G</b>						Registration Number, if PAC							
Street Address			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)						
City		State		Zip Code		M		D		Y		Amount <b>1,025.00</b>	

\* 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 \$ 3,525.00