

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 JAMES D HENDRIX						Registration Number, if PAC			
Street Address 2511 ABINGTON RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City UPPER ARLINGTON	State O H	Zip Code 43221	M 0	D 3	Y 0	Y 2	Y 1	Y 5	Amount 125.00
Full Name of Contributor JOHN C BELL						Registration Number, if PAC			
Street Address 1932 W 5TH AVE			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43212	M 0	D 3	Y 0	Y 2	Y 1	Y 5	Amount 125.00
Full Name of Contributor LESLIE A MITCHELL						Registration Number, if PAC			
Street Address 51 COLLEGE PL			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43081	M 0	D 3	Y 0	Y 1	Y 1	Y 5	Amount 125.00
Full Name of Contributor DONALD S ROBERTS						Registration Number, if PAC			
Street Address 273 BARRINGTON DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43082	M 0	D 3	Y 0	Y 3	Y 1	Y 5	Amount 125.00
Full Name of Contributor MATTHEW L STOUT						Registration Number, if PAC			
Street Address 2808 CHURCHILL DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43221	M 0	D 3	Y 0	Y 6	Y 1	Y 5	Amount 125.00
Full Name of Contributor ROBERT M KLEIN						Registration Number, if PAC			
Street Address 4875 BALDWIN RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD	State O H	Zip Code 43026	M 0	D 3	Y 1	Y 0	Y 1	Y 5	Amount 125.00
Full Name of Contributor GREGORY BACHMAN						Registration Number, if PAC			
Street Address 631 MEGGLEN AVE			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City AKRON	State O H	Zip Code 44303	M 0	D 3	Y 1	Y 2	Y 1	Y 5	Amount 125.00
Full Name of Contributor KEYCORP ADVOCATES FUND						Registration Number, if PAC C00073155			
Street Address 127 PUBLIC SQUARE			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City CLEVELAND	State O H	Zip Code 44144	M 0	D 3	Y 0	Y 9	Y 1	Y 5	Amount 250.00

* 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 \$ 1,125.00