

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 BRETT KAUFMAN						Registration Number, if PAC			
Street Address 125 STANBERY AVE			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H		Zip Code 43209		M D Y 0 2 2 9 1 2		Amount 100.00	
Full Name of Contributor ANTHONY SLANEC						Registration Number, if PAC			
Street Address 401 FREBIS AVE			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H		Zip Code 43206		M D Y 0 3 1 1 1 2		Amount 100.00	
Full Name of Contributor TIMOTHY VANECHO						Registration Number, if PAC			
Street Address 6191 HERITAGE LAKES DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD		State O H		Zip Code 43026		M D Y 0 3 1 2 1 2		Amount 100.00	
Full Name of Contributor AT&T INC, OHIO EMPLOYEE PAC						Registration Number, if PAC C00377044			
Street Address 150 E. GAY ST, ROOM 4A			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H		Zip Code 43215		M D Y 0 2 0 1 1 2		Amount 100.00	
Full Name of Contributor CONTRIBUTIONS IN OFFICEHOLDERS EMPLOY FORM 31-G						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)		
City		State		Zip Code		M D Y		Amount 400.00	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)		
City		State		Zip Code		M D Y		Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)		
City		State		Zip Code		M D Y		Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)		
City		State		Zip Code		M D Y		Amount	

* 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 \$ 800.00