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 of PAC										
The state of the s										
BRICKER & ECKLER LLP STATE POL. Street Address			On/Labor Organization	H O	118	21		Francisco de Charl		
	Employer/Oc	сирап	on/Labor Organization					Form (Cash, Check,	etc.)	
100 S. THIRD ST	Ctoto		7- C-I-	1.61	_	5	I 1/	CHECK		
	State	Н	Zip Code	M	- 1	D =	Υ _	Amount	250.00	
COLUMBUS Full Name of Contributor	0	11	43215		_	0 7	1 7		250.00	
JAMES M HOUK Street Address	TEmployar/Oa		and about Organization	L				Form (Cash, Check,		
	Employer/Occupation/Labor Organization								etc.)	
2916 PICKWICK DR	Cana		7:- 0-1-	1.4		D	F v/	CHECK		
· ·	State	LI	Zip Code	M	- 1	D	Y	Amount	405.00	
COLUMBUS	0	H	43221	$0 \mid 2$	_	<u>2 2</u>	1 7		125.00	
Full Name of Contributor Registration Number, if PAC										
RINGLE FOR ENGINEER	In 1 (0			<u> </u>						
Street Address	Employer/Od	cupata	on/Labor Organization					Form (Cash, Check,	etc.)	
865 MACON ALLEY	0			1				CHECK		
City	State		Zip Code	М	- 1	D	Y	Amount		
COLUMBUS	O :	Н	43206	0_{\perp}^{2}) 9	1 7		125.00	
Full Name of Contributor				Registr	ation	Numbe	r, if PAC			
GDP GROUP - MANDY BISHOP										
Street Address	Employer/Occupation/Labor Organization							Form (Cash, Check, etc.)		
520 MAIN ST. STE. 2531								CHECK	·· ·	
City	State		Zip Code	M	- 1	D	Y _	Amount		
AKRON	0	H	44311	0 2		1 6	1 7		100.00	
Full Name of Contributor Registration Number, if PAC										
	DP GROUP - CHAD BURTON									
Street Address	Employer/Occupation/Labor Organization							Form (Cash, Check,	etc.)	
520 MAIN ST. STE. 2531				1 - 2:			1	CHECK		
City	State		Zip Code	M	- 1	D	Y	Amount		
AKRON	O	H	44311	$0 \mid 2$			1 7		100.00	
Full Name of Contributor				Registra	ation	Numbe	r, if PAC			
GDP GROUP - BRIAN CHRISTY										
Street Address	Employer/Occupation/Labor Organization							Form (Cash, Check,	etc.)	
520 MAIN ST. STE. 2531								CHECK		
City	State		Zip Code	М	-	D	Y	Amount		
AKRON	0	H	44311			l ; 6		<u> </u>	100.00	
Full Name of Contributor				Registr	ation	Numbe	r, if PAC			
GDP GROUP - WALID GEYAMEL										
Street Address	Employer/Occupation/Labor Organization							Form (Cash, Check,	etc.)	
520 MAIN ST. STE. 2531								CHECK		
City	State		Zip Code	M		D	Y	Amount		
_AKRON	0	H	44311	$0 \mid 2$	2 1	6	1:7		100.00	
Full Name of Contributor Registration Number, if PAC										
GDP GROUP - AARON HERKENHOF	F									
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)			
520 MAIN ST. STE. 2531								CHECK		
City	State		Zip Code	M	T	D	Y	Amount		
AKRON	O .	H	44311	$0 \mid 2$	2 1	l 6	1 7		100.00	
* Remired for contributions over \$100 to statewide and general assembly candidate	10 11				_					

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 \$ 1,000.00