

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 ROBERT J. WEILER JR.						Registration Number, if PAC			
Street Address 10 N. HIGH ST. SUITE 401			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H		Zip Code 43215		M: 0 1 D: 2 4 Y: 1 4		Amount 100.00	
Full Name of Contributor JANE A. SMITH						Registration Number, if PAC			
Street Address 8325 LANCASTER CIRCLEVILLE RD S			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City LANCASTER		State O H		Zip Code 43130-9256		M: 0 1 D: 2 4 Y: 1 4		Amount 100.00	
Full Name of Contributor TIMOTHY A 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: 0 1 D: 2 4 Y: 1 4		Amount 100.00	
Full Name of Contributor DAVID C. RUMA						Registration Number, if PAC			
Street Address 4220 SHIRE COVE ROAD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD		State O H		Zip Code 43026		M: 0 1 D: 2 4 Y: 1 4		Amount 100.00	
Full Name of Contributor DAVID W. HELM						Registration Number, if PAC			
Street Address 9730 SOUTHERN BELLE CT			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City DAYTON		State O H		Zip Code 45458		M: 0 1 D: 2 8 Y: 1 4		Amount 100.00	
Full Name of Contributor HEATHER WRIGHTSEL						Registration Number, if PAC			
Street Address 2245 TREMONT RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H		Zip Code 43221		M: 0 1 D: 2 8 Y: 1 4		Amount 200.00	
Full Name of Contributor PATRICK SHIVLEY						Registration Number, if PAC			
Street Address 1159 HARRISON POND DR.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City NEW ALBANY		State O H		Zip Code 43054-9551		M: 0 1 D: 3 1 Y: 1 4		Amount 100.00	
Full Name of Contributor JOHN W. ROYER						Registration Number, if PAC			
Street Address 1480 DUBLIN RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H		Zip Code 43215		M: 0 2 D: 0 3 Y: 1 4		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 \$ 1,050.00