

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 A. FISHER						Registration Number, if PAC	
Street Address 10145 TUSCANY CT			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK	
City PLAIN CITY	State O	H H	Zip Code 43064	M 0	D 2	Y 2	Amount 100.00
Full Name of Contributor JACK E. DOWNS						Registration Number, if PAC	
Street Address 3095 PARKSIDE RD			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O	H H	Zip Code 43204	M 0	D 2	Y 2	Amount 100.00
Full Name of Contributor RICHARD G CUMMINS						Registration Number, if PAC	
Street Address 5583 VILLA GATES DR			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK	
City HILLIARD	State O	H H	Zip Code 43026	M 0	D 2	Y 2	Amount 100.00
Full Name of Contributor SAVVAS P. SOPHOCLEOUS						Registration Number, if PAC	
Street Address 5387 REDWATER DR			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK	
City DUBLIN	State O	H H	Zip Code 43016	M 0	D 2	Y 2	Amount 100.00
Full Name of Contributor CENTRAL OHIO REALTORS POLITICAL ACTION COMMITTEE						Registration Number, if PAC	
Street Address 2700 AIRPORT DR			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O	H H	Zip Code 43219	M 0	D 2	Y 0	Amount 400.00
Full Name of Contributor SILVER DRIVE PARTNERS - FRANK KASS						Registration Number, if PAC	
Street Address 150 E. BROAD ST			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O	H H	Zip Code 43215	M 0	D 2	Y 1	Amount 100.00
Full Name of Contributor KENNETH R. CAMPBELL TTEE						Registration Number, if PAC	
Street Address 4564 MORRIS CT			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK	
City MASON	State O	H H	Zip Code 45040	M 0	D 2	Y 0	Amount 100.00
Full Name of Contributor MSCPAC						Registration Number, if PAC	
Street Address PO BOX 594			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK	
City YOUNGSTOWN	State O	H H	Zip Code 44501	M 0	D 2	Y 2	Amount 200.00

* 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)