

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 SCHOTTENSTEIN REAL ESTATE GROUP -						Registration Number, if PAC BRETT KAUFFMAN			
Street Address 2 EASTON OVAL, SUITE 510			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H	Zip Code 43219		M 0	D 2	Y 2	Y 2	Amount 100.00
Full Name of Contributor JAMES BALOUGH						Registration Number, if PAC			
Street Address 2307 RIDGEWAY PLACE			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CASH		
City NORTHWOOD		State O H	Zip Code 43619		M 0	D 2	Y 2	Y 3	Amount 100.00
Full Name of Contributor LYNN ROOSE JR						Registration Number, if PAC			
Street Address 5830 HOUGHARD RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CASH		
City DUBLIN		State O H	Zip Code 43017		M 0	D 2	Y 2	Y 3	Amount 100.00
Full Name of Contributor JOSEPH D. ERB						Registration Number, if PAC			
Street Address 3293 SCIOTO FARMS DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CASH		
City HILLIARD		State O H	Zip Code 43026		M 0	D 2	Y 2	Y 3	Amount 25.00
Full Name of Contributor ELVERNA E. WOLPERT REVOCABLE TRUST						Registration Number, if PAC			
Street Address 4786 DAVIDSON RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD		State O H	Zip Code 43026		M 0	D 2	Y 1	Y 5	Amount 100.00
Full Name of Contributor RUTH A. ADAMONIS						Registration Number, if PAC			
Street Address 2461 WARM SPRINGS DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD		State O H	Zip Code 43026		M 0	D 2	Y 2	Y 2	Amount 50.00
Full Name of Contributor JOHN R. VERTAL						Registration Number, if PAC			
Street Address 5492 BRIXTON CT			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD		State O H	Zip Code 43026		M 0	D 2	Y 2	Y 5	Amount 25.00
Full Name of Contributor JOSEPH H. CARLETON						Registration Number, if PAC			
Street Address 5126 CAVALIER DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD		State O H	Zip Code 43026		M 0	D 2	Y 1	Y 2	Amount 50.00

* 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 \$ 550.00