

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 DAVID D. DENNISTON					Registration Number, if PAC		
Street Address 238 CREIGHTON CT		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City GAHANNA	State O H	Zip Code 43230	M 0	D 2	Y 2 0 1 8	Amount 250.00	
Full Name of Contributor RICK E. CATTRAN					Registration Number, if PAC		
Street Address 6443 COONPATH RD		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City CARROLL	State O H	Zip Code 43112	M 0	D 2	Y 1 2 1 8	Amount 125.00	
Full Name of Contributor JAMES R. WEAVER					Registration Number, if PAC		
Street Address P.O. BOX 102		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City BALTIMORE	State O H	Zip Code 43106	M 0	D 2	Y 2 0 1 8	Amount 125.00	
Full Name of Contributor BRIAN D. PENCE					Registration Number, if PAC		
Street Address 227 ISSAC THARP ST		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City PATASKALA	State O H	Zip Code 43062	M 0	D 2	Y 2 0 1 8	Amount 250.00	
Full Name of Contributor MARCIA MAJIDZADEH LAMPMAN					Registration Number, if PAC		
Street Address 2310 COB TAIL WAY		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City BLACKLICK	State O H	Zip Code 43004	M 0	D 2	Y 1 9 1 8	Amount 125.00	
Full Name of Contributor JAMES L. BENDER					Registration Number, if PAC		
Street Address 1743 ASHLAND AVE		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43212	M 0	D 2	Y 1 9 1 8	Amount 125.00	
Full Name of Contributor ROBERT L. KIRKLEY					Registration Number, if PAC		
Street Address 7548 OVERLAND TR		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City DELAWARE	State O H	Zip Code 43015	M 0	D 2	Y 1 3 1 8	Amount 250.00	
Full Name of Contributor BROOKS VOGEL					Registration Number, if PAC		
Street Address 7605 GYLWYN CT		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 2	Y 2 0 1 8	Amount 125.00	

* 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 \$ 1,375.00