

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 JEFFREY R. KERR						Registration Number, if PAC			
Street Address 2840 SHADY RIDGE DR.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O	H H	Zip Code 43231	M 0	D 2	D 2	Y 4	Y 1	Amount 80.00
Full Name of Contributor EDWARD P. FERRIS						Registration Number, if PAC			
Street Address 1959 COLLINGSWOOD RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City UPPER ARLINGTON	State O	H H	Zip Code 43221	M 0	D 2	D 2	Y 4	Y 1	Amount 100.00
Full Name of Contributor MANOJ SETHI						Registration Number, if PAC			
Street Address 7674 JOHNTIMM CT			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O	H H	Zip Code 43017	M 0	D 2	D 2	Y 3	Y 1	Amount 80.00
Full Name of Contributor GEORGE D. DAILY						Registration Number, if PAC			
Street Address 8460 MORRIS RD.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD	State O	H H	Zip Code 43026	M 0	D 2	D 2	Y 4	Y 1	Amount 300.00
Full Name of Contributor DAVID H. PARSLEY						Registration Number, if PAC			
Street Address 4702 HOFFMAN FARMS DR.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD	State O	H H	Zip Code 43026	M 0	D 2	D 2	Y 4	Y 1	Amount 100.00
Full Name of Contributor GREGORY E. EVANS						Registration Number, if PAC			
Street Address 5654 DAVIDSON RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD	State O	H H	Zip Code 43026	M 0	D 2	D 2	Y 4	Y 1	Amount 80.00
Full Name of Contributor DOUGLAS C. LANDENBERGER						Registration Number, if PAC			
Street Address 4914 BRITTON FARMS CT			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD	State O	H H	Zip Code 43026	M 0	D 2	D 2	Y 4	Y 1	Amount 100.00
Full Name of Contributor JAY MUETHER						Registration Number, if PAC			
Street Address 3434 HERITAGE OAKS DR.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City HILLIARD	State O	H H	Zip Code 43026	M 0	D 2	D 2	Y 4	Y 1	Amount 80.00

* 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)