

# Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee to Elect Donald Schonhardt</b>							
Full Name of Contributor <b>AMYJANE K CAMPBELL</b>					Registration Number, if PAC		
Street Address <b>435 RIDGE VIEW PLACE</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>POWELL</b>	State <b>O H</b>	Zip Code <b>43065</b>	M <b>0</b>	D <b>2</b>	Y <b>0 1 1 6</b>	Amount <b>125.00</b>	
Full Name of Contributor <b>ROBERT A. DRAPER, JR.</b>					Registration Number, if PAC		
Street Address <b>397 HIGHLAND AVE</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>FORT MITCHELL</b>	State <b>K Y</b>	Zip Code <b>41017</b>	M <b>0</b>	D <b>2</b>	Y <b>1 0 1 6</b>	Amount <b>125.00</b>	
Full Name of Contributor <b>PEGGY GARRISON</b>					Registration Number, if PAC		
Street Address <b>5290 LOCUST HILL LN</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DUBLIN</b>	State <b>O H</b>	Zip Code <b>43017</b>	M <b>0</b>	D <b>2</b>	Y <b>0 3 1 6</b>	Amount <b>125.00</b>	
Full Name of Contributor <b>STEPHEN L. THIEKEN</b>					Registration Number, if PAC		
Street Address <b>6490 HIGHLANDS CT</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DELAWARE</b>	State <b>O H</b>	Zip Code <b>43015</b>	M <b>0</b>	D <b>2</b>	Y <b>0 4 1 6</b>	Amount <b>125.00</b>	
Full Name of Contributor <b>MARY E. SEIDLE</b>					Registration Number, if PAC		
Street Address <b>4733 CLUBPARK DR</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>2</b>	Y <b>2 1 1 6</b>	Amount <b>125.00</b>	
Full Name of Contributor <b>JAMES A. HOLOWICKI</b>					Registration Number, if PAC		
Street Address <b>5049 CEMETERY RD</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>2</b>	Y <b>0 2 1 6</b>	Amount <b>500.00</b>	
Full Name of Contributor <b>BLAKE A. RAFELD</b>					Registration Number, if PAC		
Street Address <b>3504 COLCHESTER</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>	State <b>O H</b>	Zip Code <b>43221</b>	M <b>0</b>	D <b>1</b>	Y <b>2 9 1 6</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>JOHN W. ROYER</b>					Registration Number, if PAC		
Street Address <b>1480 DUBLIN RD</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>	State <b>O H</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>1</b>	Y <b>2 8 1 6</b>	Amount <b>250.00</b>	

\* 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 \$ 1,475.00