

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 THOMAS M. WARNER					Registration Number, if PAC		
Street Address 7105 PLEASANT COLONY CIRCLE		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City BLACKLICK	State O H	Zip Code 43004	M 0	D 2	Y 2 7 1 3	Amount 200.00	
Full Name of Contributor ROBERT APEL					Registration Number, if PAC		
Street Address 4633 HAYDEN RUN RD		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43221	M 0	D 2	Y 2 6 1 3	Amount 100.00	
Full Name of Contributor GREGORY BACHMAN					Registration Number, if PAC		
Street Address 12281 MALLARD POND CT NW		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City PICKERINGTON	State O H	Zip Code 43147	M 0	D 2	Y 2 3 1 3	Amount 100.00	
Full Name of Contributor DREW BERLIN					Registration Number, if PAC		
Street Address 6870 FLEUR DRIVE		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43082	M 0	D 2	Y 2 5 1 3	Amount 100.00	
Full Name of Contributor DANIEL BIRU					Registration Number, if PAC		
Street Address 1239 CANTERHURST ST.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City BLACKLICK	State O H	Zip Code 43004	M 0	D 2	Y 2 7 1 3	Amount 100.00	
Full Name of Contributor CHARLES WILLIAM BUCK					Registration Number, if PAC		
Street Address 4814 CANTERWOOD CT.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City HILLIARD	State O H	Zip Code 43026	M 0	D 2	Y 2 6 1 3	Amount 100.00	
Full Name of Contributor MARK D. PACE					Registration Number, if PAC		
Street Address 12107 CHIPPEWA RD		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City BRECKSVILLE	State O H	Zip Code 44141	M 0	D 2	Y 2 2 1 3	Amount 200.00	
Full Name of Contributor GREGORY COMFORT					Registration Number, if PAC		
Street Address 2275 ONANDAGA DR		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43221	M 0	D 2	Y 2 6 1 3	Amount 100.00	

* 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 \$ 1,000.00