

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 NORMAN MURPHY						Registration Number, if PAC			
Street Address 54 SYCAMORE RIDGE DR			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City POWELL		State O H		Zip Code 43065		M 0	D 1	Y 2	Amount 100.00
Full Name of Contributor ROBERT WEILER JR.						Registration Number, if PAC			
Street Address 10 N. HIGH ST.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H		Zip Code 43215		M 0	D 1	Y 2	Amount 100.00
Full Name of Contributor JAMES GARRISON						Registration Number, if PAC			
Street Address 5290 LOCUST HILL LN			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City DUBLIN		State O H		Zip Code 43017		M 0	D 1	Y 2	Amount 100.00
Full Name of Contributor BERNARD BOUMAN						Registration Number, if PAC			
Street Address 1007 WEATHER VANE WAY			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City PLAIN CITY		State O H		Zip Code 43064		M 0	D 1	Y 2	Amount 100.00
Full Name of Contributor JANE SMITH						Registration Number, if PAC			
Street Address 8325 LANCASTER-CIRCLEVILLE RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City LANCASTER		State O H		Zip Code 43130		M 0	D 1	Y 2	Amount 100.00
Full Name of Contributor JAMES LIPNOS						Registration Number, if PAC			
Street Address 7019 DEAN FARM RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City NEW ALBANY		State O H		Zip Code		M 0	D 2	Y 2	Amount 100.00
Full Name of Contributor RICHARD MCCALL						Registration Number, if PAC			
Street Address 5928 HAUGHN RD			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City GROVE CITY		State O H		Zip Code 43123		M 0	D 2	Y 0	Amount 100.00
Full Name of Contributor DAVID HELM						Registration Number, if PAC			
Street Address 9730 SOUTHERN BELLE CT			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) CHECK		
City DAYTON		State O H		Zip Code 45458		M 0	D 2	Y 0	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 \$ 800.00