

# 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>JOE SUGAR</b>						Registration Number, if PAC			
Street Address <b>1568 ROXBURY 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>43212</b>		M <b>0</b>	D <b>2</b>	Y <b>0</b>	Amount <b>100.00</b>
Full Name of Contributor <b>ROBERT APEL</b>						Registration Number, if PAC			
Street Address <b>4633 HAYDEN RUN 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>43221</b>		M <b>0</b>	D <b>2</b>	Y <b>0</b>	Amount <b>100.00</b>
Full Name of Contributor <b>CATHERINE CUNNINGHAM</b>						Registration Number, if PAC			
Street Address <b>5367 HESSLER CIRCLE</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</b>	Amount <b>100.00</b>
Full Name of Contributor <b>RINGLE FOR ENGINEER</b>						Registration Number, if PAC			
Street Address <b>865 MACON ALLEY</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>		State <b>O   H</b>		Zip Code <b>43206</b>		M <b>0</b>	D <b>2</b>	Y <b>0</b>	Amount <b>100.00</b>
Full Name of Contributor <b>BIA BUILD PAC OF CENTRAL OHIO</b>						Registration Number, if PAC			
Street Address <b>495 EXECUTIVE CAMPUS DR</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>WESTERVILLE</b>		State <b>O   H</b>		Zip Code <b>43082</b>		M <b>0</b>	D <b>2</b>	Y <b>2</b>	Amount <b>100.00</b>
Full Name of Contributor <b>CITIZENS FOR CHERYL GROSSMAN</b>						Registration Number, if PAC			
Street Address <b>3955 BROWN PARK DR, SUITE A</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>1</b>	Y <b>2</b>	Amount <b>100.00</b>
Full Name of Contributor <b>MSPAC</b>						Registration Number, if PAC			
Street Address <b>PO BOX 594</b>			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>YOUNGSTOWN</b>		State <b>O   H</b>		Zip Code <b>44501</b>		M <b>0</b>	D <b>2</b>	Y <b>2</b>	Amount <b>200.00</b>
Full Name of Contributor <b>WILES, BOYLE, BURKHOLDER, BRINGARDNER, CO LPA - PAC</b>						Registration Number, if PAC			
Street Address <b>300 SPRUCE ST</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</b>	Amount <b>100.00</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 \$ 900.00