

Statement of Contributions Received

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Prescribed by Secretary of State 03/05 The Elect Steven M. Bennett Committee Registration Number, if PAC Full Name of Contributor Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization* State Zip Code OH Registration Number, if PAC Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Zip Code Amount State City OH Registration Number, if PAC Full Name of Contributor Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization State Zip Code Amount OH. Registration Number, if PAC Full Name of Contributor Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization* Zip Code Amount State OH Full Name of Contributor Registration Number, if PAC Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization* State Zip Code Amount City OH Registration Number, if PAC Full Name of Contributor Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Amount State Zip Code City OH Registration Number, if PAC Full Name of Contributor Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization® State Zip Code City OH Registration Number, if PAC Full Name of Contributor Form (Cash, Check, etc.) Employer/Occupation/Labor Organization Street Address Amount State Zip Code OH

Page Total \$7200.00

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, 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 also appear. [R.C. 3517.10(B)(4)]