

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|   |                       |  |                   |                   |   |                           |  |
|---|-----------------------|--|-------------------|-------------------|---|---------------------------|--|
| Name of Committee in Full<br><b>Committee to re-elect Kennedy 6611 W.Broad St , Galloway , Ohio 43119</b> |                       |  |                   |                   |   |                           |  |
| Full Name of Contributor<br><b>Steve Kennedy</b>  |                       |  |                   |                   | Registration Number, if PAC                 |                           |  |
| Street Address<br><b>6621 W.Broad St</b>  |                       | Employer/Occupation/Labor Organization*<br><b>Steve's Country Drive Thru</b> |                   |                   | Form (Cash, Check, etc.)<br><b>Transfer</b> |                           |  |
| City<br><b>Galloway</b>   | State<br><b>O   H</b> | Zip Code<br><b>43119</b>   | M<br><b>0   7</b> | D<br><b>2   0</b> | Y<br><b>0   9</b>                           | Amount<br><b>2,000.00</b> |  |
| Full Name of Contributor<br><b>Steve Kennedy</b>  |                       |  |                   |                   | Registration Number, if PAC                 |                           |  |
| Street Address<br><b>6621 W.Broad St</b>  |                       | Employer/Occupation/Labor Organization*<br><b>Steve's Country Drive Thru</b> |                   |                   | Form (Cash, Check, etc.)<br><b>Transfer</b> |                           |  |
| City<br><b>Galloway</b>   | State<br><b>O   H</b> | Zip Code<br><b>43119</b>   | M<br><b>0   8</b> | D<br><b>2   9</b> | Y<br><b>0   9</b>                           | Amount<br><b>302.85</b>   |  |
| Full Name of Contributor<br><b>Steve Kennedy</b>  |                       |  |                   |                   | Registration Number, if PAC                 |                           |  |
| Street Address<br><b>6621 W.Broad St</b>  |                       | Employer/Occupation/Labor Organization*<br><b>Steve's Country Drive Thru</b> |                   |                   | Form (Cash, Check, etc.)<br><b>Transfer</b> |                           |  |
| City<br><b>Galloway</b>   | State<br><b>O   H</b> | Zip Code<br><b>43119</b>   | M<br><b>1   0</b> | D<br><b>0   5</b> | Y<br><b>0   9</b>                           | Amount<br><b>2,000.00</b> |  |
| Full Name of Contributor  |                       |  |                   |                   | Registration Number, if PAC                 |                           |  |
| Street Address  |                       | Employer/Occupation/Labor Organization*                                      |                   |                   | Form (Cash, Check, etc.)                    |                           |  |
| City  | State                 | Zip Code   | M                 | D                 | Y   | Amount                    |  |
| Full Name of Contributor  |                       |  |                   |                   | Registration Number, if PAC                 |                           |  |
| Street Address  |                       | Employer/Occupation/Labor Organization*                                      |                   |                   | Form (Cash, Check, etc.)                    |                           |  |
| City  | State                 | Zip Code   | M                 | D                 | Y   | Amount                    |  |
| Full Name of Contributor  |                       |  |                   |                   | Registration Number, if PAC                 |                           |  |
| Street Address  |                       | Employer/Occupation/Labor Organization*                                      |                   |                   | Form (Cash, Check, etc.)                    |                           |  |
| City  | State                 | Zip Code   | M                 | D                 | Y   | Amount                    |  |
| Full Name of Contributor  |                       |  |                   |                   | Registration Number, if PAC                 |                           |  |
| Street Address  |                       | Employer/Occupation/Labor Organization*                                      |                   |                   | Form (Cash, Check, etc.)                    |                           |  |
| City  | State                 | Zip Code   | M                 | D                 | Y   | Amount                    |  |
| Full Name of Contributor  |                       |  |                   |                   | Registration Number, if PAC                 |                           |  |
| Street Address  |                       | Employer/Occupation/Labor Organization*                                      |                   |                   | Form (Cash, Check, etc.)                    |                           |  |
| City  | State                 | Zip Code   | M                 | D                 | Y   | Amount                    |  |

\* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 4,302.85