

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full THE ELECT STEVEN M. BENNETT COMMITTEE						
Full Name of Contributor SEAN M. BENNETT				Registration Number, if PAC		
Street Address 6473 TALLMAN CT.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City CANAL WINCHESTER		State OH	Zip Code 43110	M 0	D 9	Y 2 3 1 1
				Amount \$50.00		
Full Name of Contributor MARY G. WODARCYK				Registration Number, if PAC		
Street Address 5834 WILLOWLAKE DR.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY		State OH	Zip Code 43123	M 0	D 9	Y 2 2 1 1
				Amount \$25.00		
Full Name of Contributor ROBERT L MCCARTY CO LPA - GREG KOSTELAC				Registration Number, if PAC		
Street Address 155 W. MAIN ST., #200A		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS		State OH	Zip Code 43215	M 0	D 9	Y 2 1 1 1
				Amount \$50.00		
Full Name of Contributor ENVIRONMENTAL ANALYSIS GROUP - FRANK BOLIN				Registration Number, if PAC		
Street Address 1546 OJIBWAS CT.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY		State OH	Zip Code 43123	M 0	D 9	Y 2 5 1 1
				Amount \$350.00		
Full Name of Contributor DAVID V. HELLARD				Registration Number, if PAC		
Street Address 3151 ORDERS RD.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY		State OH	Zip Code 43123	M 1	D 0	Y 1 0 1 1
				Amount \$30.00		
Full Name of Contributor JANE WELLS BATES				Registration Number, if PAC		
Street Address 2948 FRANCHEL CT.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City LANCASTER		State OH	Zip Code 43130	M 1	D 0	Y 0 5 1 1
				Amount \$25.00		
Full Name of Contributor GROVE CITY AREA REPUBLICAN CLUB				Registration Number, if PAC		
Street Address 5580 MEADOW GROVE DR.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY		State OH	Zip Code 43123	M 1	D 0	Y 1 0 1 1
				Amount \$300.00		
Full Name of Contributor RICHARD SMITH				Registration Number, if PAC		
Street Address 569 DLYN ST.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS		State OH	Zip Code 43228	M 1	D 0	Y 0 4 1 1
				Amount \$200.00		

* 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)]