

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

| | | | |
|--|--|--------------------------|---|
| Name of Committee in Full THE ELECT STEVEN M BENNETT COMMITTEE | | | |
| Full Name of Contributor Steven Bennett | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address 1806 Hawthorne Pkwy | Description of Item or Service postage | | M D Y Fair Market Value 11 01 13 115.50 |
| City Grove City | State OH | Zip Code 43123 | Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO |
| Full Name of Contributor Steven Bennett | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address 1806 Hawthorne Pkwy | Description of Item or Service door bags | | M D Y Fair Market Value 09 24 13 86.28 |
| City Grove City | State OH | Zip Code 43123 | Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO |
| Full Name of Contributor Steven Bennett | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address 1206 Hawthorn Pkwy | Description of Item or Service Printer Ink | | M D Y Fair Market Value 01 23 13 49.89 |
| City Grove City | State OH | Zip Code 43123 | Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO |
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| City | State OH | Zip Code | Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO |
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| City | State OH | Zip Code | Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO |
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| City | State OH | Zip Code | Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO |
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| City | State OH | Zip Code | Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO |
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| City | State OH | Zip Code | Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO |

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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)]