

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 YEOU-LONG SHYU							Registration Number, if PAC		
Street Address 1947 STRINGTOWN RD				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK	
City GROVE CITY		State OH		Zip Code 43123		M 1		D 0	
						Y 1		Amount \$50.00	
Full Name of Contributor GROVE CITY AREA REPUBLICAN CLUB							Registration Number, if PAC		
Street Address 4152 PATZER AVE				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK	
City GROVE CITY		State OH		Zip Code 43123		M 1		D 0	
						Y 1		Amount \$444.00	
Full Name of Contributor STEVEN KNOX							Registration Number, if PAC		
Street Address 236 GATESIDE				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CASH	
City GAHANNA		State OH		Zip Code 43230		M 1		D 0	
						Y 1		Amount \$200.00	
Full Name of Contributor CONTRIBUTIONS RECEIVED FROM FORM 31-E							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M 1		D 0	
						Y 1		Amount \$200.00	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		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 OH		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 OH		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 OH		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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$714.00**