

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 CHARLES & 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 0	D 9	Y 2	5	0	Amount \$50.00
Full Name of Contributor CHRISTIAN & JEANNETTE ROTH JR						Registration Number, if PAC			
Street Address 6154 CATAWBA DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City GROVE CITY		State OH	Zip Code 43123	M 0	D 9	Y 2	5	0	Amount \$50.00
Full Name of Contributor VINCENT AIELLO						Registration Number, if PAC			
Street Address 3140 KROPP RD			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City GROVE CITY		State OH	Zip Code 43123	M 0	D 9	Y 2	4	0	Amount \$50.00
Full Name of Contributor STEVEN L SELLERS						Registration Number, if PAC			
Street Address 4488 ANGLEBROOK DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City GROVE CITY		State OH	Zip Code 43123	M 0	D 9	Y 2	4	0	Amount \$50.00
Full Name of Contributor CHARLES T SMITH						Registration Number, if PAC			
Street Address 4719 TEABURY SQ S			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CASH		
City GROVE CITY		State OH	Zip Code 43123	M 0	D 9	Y 2	4	0	Amount \$100.00
Full Name of Contributor J CARY KOPPERT						Registration Number, if PAC			
Street Address 2237 NOTTINGHAM RD			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State OH	Zip Code 43221	M 0	D 9	Y 2	9	0	Amount \$25.00
Full Name of Contributor P STEVEN GRAPP						Registration Number, if PAC			
Street Address 3135 POTAWAMIE DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City LONDON		State OH	Zip Code 43140	M 0	D 9	Y 2	9	0	Amount \$100.00
Full Name of Contributor TAMARA B SHANYFELT & WILLIAM R BYRD						Registration Number, if PAC			
Street Address 4232 KELNOR DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City GROVE CITY		State OH	Zip Code 43123	M 0	D 9	Y 3	0	0	Amount \$100.00

* 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)]