In-Kind Contributions Received

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Page	<u> </u>

Prescribed by Secretary of State 03/05

Name of Committee in Full THE ELECT STEVEN M BENNETT COMMITTEE					
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Steven Bennett					
Street Address Hawthorne Pkw	Description of Item or Service A POSTAGE		101013. 115,50		
City Grove City	State OH	12 ip Code / 43/23	Received at Fund	draising Event?	
Full Name of Contributor BUNETT	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address 1806 Hawthore Prwy	Description of Item or Service Dags		M D Y Fair Market Value		
City Grove Cetal	Stal to OH	2ip Code 43123	Received at Fundraising Event? O YES NO		
Full Name of Contributor BY METT	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address 1206 Hawthorn Pkwy	Description of Item or Service OFUNTER LIKE		M D Y Fair Market Value O 8301249.29		
City Crove City	State OH	Zip Code 43123	Received at Fund	© ио	
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*	Registration Number, if PAC		
Street Address	Description of Item	or Service	M D Y Fair Market Value		
City	Stal to OH	Zip Code	Received at Fundraising Event? OYES 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	Stal te OH	Zip Code	Received at Fund	Iraising Event?	
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	Sta'te OH	Zip Code	Received at Fund	draising Event?	
Full Name of Contributor	Employer, Occupation, Labor Organization* Registration Number, if PA				
Street Address	Description of Item or Service		M D	Y Fair Market Value	
City	Stalte OH	Zip Code	Received at Fundraising Event? O YES O 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 Fund	draising Event?	

Page Total 25/.67

^{*} 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)]