

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Ben Kessler for Bexley City Council									
Full Name of Contributor Lee Hess						Registration Number, if PAC			
Street Address 324 North Drexel Avenue			Employer/Occupation/Labor Organization* Installs Inc / Owner				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 7	D 2	Y 0	Amount 200.00
Full Name of Contributor Richard Snowdon						Registration Number, if PAC			
Street Address 326 North Columbia Avenue			Employer/Occupation/Labor Organization* Diamond Hill Inv/Equity Analyst				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 0	D 9	Y 1	Amount 150.00
Full Name of Contributor Linda Zupnick						Registration Number, if PAC			
Street Address 77 South Cassady Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 0	D 9	Y 0	Amount 25.00
Full Name of Contributor Jeff Meyer						Registration Number, if PAC			
Street Address 195 South Columbia Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 0	D 9	Y 2	Amount 100.00
Full Name of Contributor Howard Schottenstein						Registration Number, if PAC			
Street Address 2392 East Main Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 9	D 2	Y 6	Amount 50.00
Full Name of Contributor John Behal						Registration Number, if PAC			
Street Address 2546 Bexley Park Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 0	D 9	Y 2	Amount 100.00
Full Name of Contributor Malcolm Porter						Registration Number, if PAC			
Street Address 2436 Brentwood Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 0	D 9	Y 2	Amount 50.00
Full Name of Contributor Paul & Sandy Garrett						Registration Number, if PAC			
Street Address 7 Lyonsgate Drive			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 1	D 0	Y 0	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 appear. [R.C. 3517.10(B)(4)]