

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>THE ELECT STEVEN M BENNETT COMMITTEE</b>					
Full Name of Contributor <b>GREG MACKANOS</b>				Registration Number, if PAC	
Street Address <b>5936 CLIPPER LANDING</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0 9 2 3 0 9</b>	Amount <b>\$70.00</b>
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43228</b>		Form (Cash, Check, etc.) <b>CASH</b>	
Full Name of Contributor <b>WISE ENGINEERING &amp; SALES INC.</b>				Registration Number, if PAC	
Street Address <b>3145 CATON LOOP</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0 9 2 3 0 9</b>	Amount <b>\$100.00</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
Full Name of Contributor <b>TREVI TECHNOLOGY INC</b>				Registration Number, if PAC	
Street Address <b>2451 MARBLEVISTA BLVD</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0 9 2 3 0 9</b>	Amount <b>\$40.00</b>
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43204</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
Full Name of Contributor <b>DELORES CONLEY</b>				Registration Number, if PAC	
Street Address <b>5571 GAYS DR</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0 9 2 3 0 9</b>	Amount <b>\$25.00</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>		Form (Cash, Check, etc.) <b>CASH</b>	
Full Name of Contributor <b>KAY KAHO</b>				Registration Number, if PAC	
Street Address <b>2300 KUNZ RD</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0 9 2 3 0 9</b>	Amount <b>\$25.00</b>
City <b>GALLOWAY</b>	State <b>OH</b>	Zip Code <b>43119</b>		Form (Cash, Check, etc.) <b>CASH</b>	
Full Name of Contributor <b>JENNIFER MACKANOS</b>				Registration Number, if PAC	
Street Address <b>5936 CLIPPER LANDING</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0 9 2 3 0 9</b>	Amount <b>\$25.00</b>
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43228</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
Full Name of Contributor <b>ARTHUR SCHMIT</b>				Registration Number, if PAC	
Street Address <b>4697 HUNTING CREEK DR</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0 9 2 3 0 9</b>	Amount <b>\$50.00</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>		Form (Cash, Check, etc.) <b>CHECK</b>	

\* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

**\$0.00**

Total expenditures this event.

**\$0.00****\$335.00**