

FILED

Ohio Campaign Finance Report

09 JUL 29 PM 3:33

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
ELECTIONS

Full Name of Committee Friends for Ginther						Registration Number, if PAC					
Full Name of Candidate Andrew J. Ginther											
Street Address 98 Montrose Way						Office Sought City Council			District At Large		
City Columbus						State O H		Zip Code 43214			
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General		Annual Year		
	July		August		September		Termination		X Semiannual		
	Monthly		Monthly		Monthly				2009		
Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No			Report Electronically filed? <input type="checkbox"/> Yes <input type="checkbox"/> No			Date of Election		M	D	Y	
								1	1	0	6 0 7

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$ 816.45
2. Total monetary contributions (From Form No. 31-A)	\$ 27,725.00
3. Total other income (From Form No. 31-A-2)	\$ 2,000.00
4. Total funds available (sum of lines 1, 2, 3)	\$ 30,541.45
5. Total monetary expenditures (From Form No. 31-B)	\$ 28,407.74
6. Balance on hand (line 4 minus line 5)	\$ 2,133.71
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-C)	\$
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$
12. Value of independent expenditures made (From Form No. 31-U)	\$
13. For Electronic Filing Entities only	\$
Sum of lines 2, 7 and amount of any new loans received this period	\$

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

Jane M. O'Shaughnessy, Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Jane M. O'Shaughnessy 7/27/09
Signature Date

Contribution pages 6

Expenditure pages 12

Other pages 3

Total pages 21

Statement of Contributions Received

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Name of Committee in Full Friends for Ginther						
Full Name of Contributor Jeffrey D. Ginther				Registration Number, if PAC		
Street Address 1199 Highland St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43201	M 0 1	D 0 8	Y 0 9	Amount 60.00
Full Name of Contributor Jeffrey D. Ginther				Registration Number, if PAC		
Street Address 1199 Highland St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43201	M 0 2	D 1 1	Y 0 9	Amount 60.00
Full Name of Contributor Jeffrey W. Edwards				Registration Number, if PAC		
Street Address 495 S. High Street Ste. 150		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 0 3	D 1 8	Y 0 9	Amount 250.00
Full Name of Contributor Smith & Hale LLC				Registration Number, if PAC		
Street Address 37 West Broad St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 0 3	D 1 8	Y 0 9	Amount 250.00
Full Name of Contributor Plumbers and Pipefitters LU 189				Registration Number, if PAC PCE #6220		
Street Address 1250 Kinnear Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43212	M 0 3	D 2 1	Y 0 9	Amount 250.00
Full Name of Contributor John B. Igel				Registration Number, if PAC		
Street Address 1033 Zodiac Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online	
City Gahanna	State O H	Zip Code 43230	M 0 4	D 1 5	Y 0 9	Amount 200.00
Full Name of Contributor Hazam Gheith				Registration Number, if PAC		
Street Address 4700 Lakehurst Court Suite 200		Employer/Occupation/Labor Organization* Brown and Caldwell			Form (Cash, Check, etc.) online	
City Columbus	State O H	Zip Code 43016	M 0 4	D 1 5	Y 0 9	Amount 250.00
Full Name of Contributor Catherine O. Zwissler				Registration Number, if PAC		
Street Address 550 N. Columbia Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley	State O H	Zip Code 43209	M 0 4	D 2 1	Y 0 9	Amount 50.00

* 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)]

