

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor Randy Borntrager					Registration Number, if PAC		
Street Address 522 S. Pearl Ave		Employer/Occupation/Labor Organization* OH Democratic Party / Communications I			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 8	Y 0	Amount 35.00	
Full Name of Contributor Robert and Shirley Crosby					Registration Number, if PAC		
Street Address 1520 Thurell Rd.		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43229	M 0	D 8	Y 0	Amount 30.00	
Full Name of Contributor Dawn Tyler Lee					Registration Number, if PAC		
Street Address 2574 Dover Rd.		Employer/Occupation/Labor Organization* The Ohio State University Office of Govern			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43209	M 0	D 8	Y 0	Amount 35.00	
Full Name of Contributor Grayson L. Atha					Registration Number, if PAC		
Street Address 1337 Neil Ave		Employer/Occupation/Labor Organization* King Ave. United Methodist Church / Seni			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43201	M 0	D 8	Y 0	Amount 100.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]