

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor Arcadis Ohio PAC					Registration Number, if PAC CP1193		
Street Address 520 S. Main Street 2400		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Akron	State O H	Zip Code 44311	M 0 4	D 1 3	Y 1 0	Amount 1,000.00	
Full Name of Contributor Jerome Friedman					Registration Number, if PAC		
Street Address 332 Cliffside Dr.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) ClickNPledge	
City Columbus	State O H	Zip Code 43202	M 0 4	D 1 3	Y 1 0	Amount 100.00	
Full Name of Contributor Phillip Rasor					Registration Number, if PAC		
Street Address 4265 Reedbury Lane		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) ClickNPledge	
City Columbus	State O H	Zip Code 43220	M 0 4	D 1 3	Y 1 0	Amount 200.00	
Full Name of Contributor Transfer from 31-E					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State O H	Zip Code	M 0 5	D 1 3	Y 1 0	Amount 5,531.69	
Full Name of Contributor Herbert B. Asher					Registration Number, if PAC		
Street Address 34 W. Poplar Ave Unit 501		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 432115	M 0 5	D 2 7	Y 1 0	Amount 50.00	
Full Name of Contributor Russell C. Goodwin					Registration Number, if PAC		
Street Address 103 E. 1st Ave		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43201	M 0 5	D 2 7	Y 1 0	Amount 35.00	
Full Name of Contributor John W. Royer					Registration Number, if PAC		
Street Address 1480 Dublin Rd.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 0 5	D 2 7	Y 1 0	Amount 250.00	
Full Name of Contributor Bill R. Hedrick					Registration Number, if PAC		
Street Address 535 West First Ave.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 0 5	D 2 7	Y 1 0	Amount 25.00	

* 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)]

Page Total \$ 7,191.69