

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends for Ginther</b>					
Full Name of Contributor <b>Robert Shoaf</b>				Registration Number, if PAC	
Street Address <b>4748 Donegal Cliffs Dr.</b>	Employer/Occupation/Labor Organization* <b>URS</b>		M <b>0</b>	D <b>7</b>	Y <b>08</b>
City <b>Dublin</b>	State <b>O   H</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Stephen Henson</b>				Registration Number, if PAC	
Street Address <b>5404 Grand Ridge Dr.</b>	Employer/Occupation/Labor Organization* <b>URS</b>		M <b>0</b>	D <b>7</b>	Y <b>08</b>
City <b>Galena</b>	State <b>O   H</b>	Zip Code <b>43201</b>	Form(Cash,Check,etc) <b>check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Kerry Hogan</b>				Registration Number, if PAC	
Street Address <b>13539 Old Gate Dr.</b>	Employer/Occupation/Labor Organization* <b>URS</b>		M <b>0</b>	D <b>7</b>	Y <b>08</b>
City <b>Pickerington</b>	State <b>O   H</b>	Zip Code <b>43147</b>	Form(Cash,Check,etc) <b>check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Tom Jedlinsky</b>				Registration Number, if PAC	
Street Address <b>825 Retreat Lane</b>	Employer/Occupation/Labor Organization* <b>Camp Dresser McKee</b>		M <b>0</b>	D <b>7</b>	Y <b>08</b>
City <b>Powell</b>	State <b>O   H</b>	Zip Code <b>43065</b>	Form(Cash,Check,etc) <b>check</b>		Amount <b>250.00</b>
Full Name of Contributor <b>Kate Carus</b>				Registration Number, if PAC	
Street Address <b>113 E. Kanawha Ave.</b>	Employer/Occupation/Labor Organization* <b>Camp Dresser McKee</b>		M <b>0</b>	D <b>7</b>	Y <b>08</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43214</b>	Form(Cash,Check,etc) <b>check</b>		Amount <b>150.00</b>
Full Name of Contributor <b>Brian Young</b>				Registration Number, if PAC	
Street Address <b>3252 Kropp Rd.</b>	Employer/Occupation/Labor Organization* <b>Camp Dresser McKee</b>		M <b>0</b>	D <b>7</b>	Y <b>08</b>
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	Form(Cash,Check,etc) <b>check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Jerome Madigan</b>				Registration Number, if PAC	
Street Address <b>635 Myrtle St. NE</b>	Employer/Occupation/Labor Organization* <b>Brown and Caldwell</b>		M <b>0</b>	D <b>7</b>	Y <b>08</b>
City <b>Atlanta</b>	State <b>G   A</b>	Zip Code <b>30308</b>	Form(Cash,Check,etc) <b>check</b>		Amount <b>250.00</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 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

Total expenditures this event

Page Total \$ 1,000.00