

# 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>George Speaks</b>					Registration Number, if PAC		
Street Address <b>1594 Goodale Blvd.</b>		Employer/Occupation/Labor Organization* <b>City of Columbus / Assista</b>		M <b>1</b>	D <b>0</b>	Y <b>9</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43212</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Stephen Daley</b>					Registration Number, if PAC		
Street Address <b>4259 Olentangy Blvd.</b>		Employer/Occupation/Labor Organization* <b>Smith and Barney / Financ</b>		M <b>1</b>	D <b>0</b>	Y <b>9</b>	Amount <b>35.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43214</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Marlene Robbins</b>					Registration Number, if PAC		
Street Address <b>2230 Berwick Blvd</b>		Employer/Occupation/Labor Organization* <b>Columbus Public Schools /</b>		M <b>1</b>	D <b>0</b>	Y <b>9</b>	Amount <b>35.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Laura Stehle</b>					Registration Number, if PAC		
Street Address <b>136 Lakeview Ave</b>		Employer/Occupation/Labor Organization* <b>Franklin County / Adminis</b>		M <b>1</b>	D <b>0</b>	Y <b>9</b>	Amount <b>35.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43202</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Robert Vaughan</b>					Registration Number, if PAC		
Street Address <b>7735 Chancle Dr.</b>		Employer/Occupation/Labor Organization* <b>Best Effort / Best Effort</b>		M <b>1</b>	D <b>0</b>	Y <b>9</b>	Amount <b>35.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43235</b>	Form(Cash,Check,etc)			
Full Name of Contributor <b>Nancy Duncan Porter</b>					Registration Number, if PAC		
Street Address <b>2436 Brentwood Rd</b>		Employer/Occupation/Labor Organization* <b>Kenyon College/ Fundrais</b>		M <b>1</b>	D <b>0</b>	Y <b>9</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Hamilton Teaford</b>					Registration Number, if PAC		
Street Address <b>91 E. Deshler Ave</b>		Employer/Occupation/Labor Organization* <b>NDC / Exec. Director</b>		M <b>1</b>	D <b>0</b>	Y <b>9</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43206</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 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 \$ 290.00