

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor Kyle Kutuchief					Registration Number, if PAC		
Street Address 324 Castle Blvd.		Employer/Occupation/Labor Organization* The University of Akron / Admissions Cot			Form (Cash, Check, etc.) Online Contribu		
City Akron	State O H	Zip Code 44313	M 1 1	D 0 5	Y 0 7	Amount 25.00	
Full Name of Contributor Benjamin Weiner					Registration Number, if PAC		
Street Address 381 1/2 W 3RD AVE		Employer/Occupation/Labor Organization* Franklin County/Planner			Form (Cash, Check, etc.) Online Contribu		
City Columbus	State O H	Zip Code 43201	M 1 1	D 0 5	Y 0 7	Amount 25.00	
Full Name of Contributor Christine Cozad					Registration Number, if PAC		
Street Address 2628 N. 4th Street		Employer/Occupation/Labor Organization* Alternative Auto Care / Auto Mechanic			Form (Cash, Check, etc.) Online Contribu		
City Columbus	State O H	Zip Code 43202	M 1 1	D 0 5	Y 0 7	Amount 50.00	
Full Name of Contributor Moody Nolan PAC					Registration Number, if PAC CP1154		
Street Address 300 Spruce St.		Employer/Occupation/Labor Organization* Political Action Committee			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 1	D 0 5	Y 0 7	Amount 250.00	
Full Name of Contributor Savoy Properties					Registration Number, if PAC		
Street Address 515 E. Main St., Suite 500		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 1	D 0 5	Y 0 7	Amount 250.00	
Full Name of Contributor Teamsters Union Local No. 284 D.R.I.V.E. Fund					Registration Number, if PAC		
Street Address 555. E. Rich St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 1	D 0 5	Y 0 7	Amount 200.00	
Full Name of Contributor Sherif Aziz					Registration Number, if PAC		
Street Address 10051 Beaufort Run.		Employer/Occupation/Labor Organization* TecTech, Inc. / President			Form (Cash, Check, etc.) Check		
City Centerville	State O H	Zip Code 45458	M 1 1	D 0 5	Y 0 7	Amount 500.00	
Full Name of Contributor Chauncey Cochran					Registration Number, if PAC		
Street Address 14 E. Gay St., Suite 400		Employer/Occupation/Labor Organization* Cochran Public Relations / Executive			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 1	D 0 5	Y 0 7	Amount 200.00	

* 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)]