

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor Nationwide Better Citizenship Fund						Registration Number, if PAC OH259	
Street Address One Nationwide Plaza 1-32-06			Employer/Occupation/Labor Organization* 			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43215	M 0 7	D 0 5	Y 0 7	Amount 500.00
Full Name of Contributor Randy Borntager						Registration Number, if PAC 	
Street Address 522 S. Pearl Ave.			Employer/Occupation/Labor Organization* OH Democratic Party / Communicaions D			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43215	M 0 7	D 0 5	Y 0 7	Amount 50.00
Full Name of Contributor Dorothy Burnett						Registration Number, if PAC 	
Street Address 681 Walter Ave			Employer/Occupation/Labor Organization* Best Effort / Best Effort			Form (Cash, Check, etc.) Check	
City Fairfield		State O H	Zip Code 45014	M 0 7	D 0 5	Y 0 7	Amount 100.00
Full Name of Contributor Elizabeth Smalley						Registration Number, if PAC 	
Street Address 460 Midgard Rd			Employer/Occupation/Labor Organization* Institute for Human Services / Social Work			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43202	M 0 7	D 0 5	Y 0 7	Amount 50.00
Full Name of Contributor Thomas Isaacs						Registration Number, if PAC 	
Street Address 1197 Three Forks Dr. S			Employer/Occupation/Labor Organization* City of Columbus / Treasurer			Form (Cash, Check, etc.) Check	
City Westerville		State O H	Zip Code 43081	M 0 7	D 0 5	Y 0 7	Amount 100.00
Full Name of Contributor Jewelyn Dicello						Registration Number, if PAC 	
Street Address 6093 Mc Naughten Grove Lane			Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43213	M 0 7	D 0 5	Y 0 7	Amount 100.00
Full Name of Contributor Sally Rogers						Registration Number, if PAC 	
Street Address 153 Chase Rd			Employer/Occupation/Labor Organization* JP Morgan Chase / Banker			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0 7	D 0 5	Y 0 7	Amount 25.00
Full Name of Contributor Greg Davies						Registration Number, if PAC 	
Street Address 2646 Brandon Rd.			Employer/Occupation/Labor Organization* City of Columbus / Deputy Director of Dev			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 7	D 0 5	Y 0 7	Amount 100.00

* 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 \$ 1,025.00