

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor Randy S. Borntrager					Registration Number, if PAC		
Street Address 522 S. Pearl Ave.		Employer/Occupation/Labor Organization* OH Dem. Party / Comm. Director			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 5	D 2 1	Y 0 7	Amount 50.00	
Full Name of Contributor Jeffrey W. Edwards					Registration Number, if PAC		
Street Address 495 S. High St, Suite 150		Employer/Occupation/Labor Organization* Edwards Company / President			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 5	D 2 1	Y 0 7	Amount 250.00	
Full Name of Contributor Prof. Herbert B. Asher					Registration Number, if PAC		
Street Address 1000 Urlin Ave., Unit 1006		Employer/Occupation/Labor Organization* Ohio State University / Prof. Emeritus			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0 5	D 2 1	Y 0 7	Amount 50.00	
Full Name of Contributor Suliman Z. Abdullah					Registration Number, if PAC		
Street Address 2666 Abbot Ave.		Employer/Occupation/Labor Organization* Columbus Engineering Consultants / Man.			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 0 5	D 2 1	Y 0 7	Amount 32.00	
Full Name of Contributor William A. Goldman, Esquire					Registration Number, if PAC		
Street Address 500 S. Front St., Suite 1200		Employer/Occupation/Labor Organization* Goldman & Braunstein / Attorney			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 5	D 2 1	Y 0 7	Amount 100.00	
Full Name of Contributor Christopher J. Zigo					Registration Number, if PAC		
Street Address 5671 Wilcox Rd.		Employer/Occupation/Labor Organization* Motorola, Inc. / Government Solutions			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43016	M 0 5	D 2 1	Y 0 7	Amount 100.00	
Full Name of Contributor Kenneth W. Holland					Registration Number, if PAC		
Street Address 697 Crossing Creek South		Employer/Occupation/Labor Organization* The Olen Corp. / President			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 5	D 2 1	Y 0 7	Amount 100.00	
Full Name of Contributor Gregory Stewart					Registration Number, if PAC		
Street Address 8230 Lucas Pike		Employer/Occupation/Labor Organization* The Superior Group / CEO			Form (Cash, Check, etc.) Check		
City Plain City	State O H	Zip Code 43064	M 0 5	D 2 1	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)]