

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor Fred Holdridge					Registration Number, if PAC		
Street Address 763 S. Third St.		Employer/Occupation/Labor Organization* Self-Employed / Retail Salesman			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0 5	D 0 7	Y 0 7	Amount 50.00	
Full Name of Contributor William C. Habig					Registration Number, if PAC		
Street Address 3708 Raccoon Valley Road		Employer/Occupation/Labor Organization* DLZ / Consultant			Form (Cash, Check, etc.) Check		
City Granville	State O H	Zip Code 43023	M 0 5	D 0 7	Y 0 7	Amount 32.00	
Full Name of Contributor Michael L. Silberstein					Registration Number, if PAC		
Street Address 1088 Fountain Lane, Apt. F		Employer/Occupation/Labor Organization* Northwestern Mutual / Financial Advisor			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43123	M 0 5	D 0 7	Y 0 7	Amount 50.00	
Full Name of Contributor Mark D. Hatch					Registration Number, if PAC		
Street Address 4189 Rowanne Rd.		Employer/Occupation/Labor Organization* MEBS, Inc.			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 0 5	D 0 7	Y 0 7	Amount 32.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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 \$ 164.00