

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor Wiles, Boyle, Burkholder & Bringardner				Registration Number, if PAC CP 1058			
Street Address 300 Spruce Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43215	M 0 1	D 1 1	Y 1 0	Amount 250.00	
Full Name of Contributor Transfer from 31-E				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M 0 2	D 1 8	Y 1 0	Amount 20,145.00	
Full Name of Contributor Robert P. Kirkley				Registration Number, if PAC			
Street Address 7548 Overland Trail		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Delaware	State O H	Zip Code 43015	M 0 3	D 0 8	Y 1 0	Amount 250.00	
Full Name of Contributor A. James Seibert III				Registration Number, if PAC			
Street Address 1040 Bluesail Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville	State O H	Zip Code 43081	M 0 3	D 0 8	Y 1 0	Amount 250.00	
Full Name of Contributor UFCW Local 1059				Registration Number, if PAC PAC #LA437			
Street Address 4150 E. Main St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43213	M 0 3	D 0 9	Y 1 0	Amount 500.00	
Full Name of Contributor Estate of Jean S. Schottenstein				Registration Number, if PAC			
Street Address 107 S. High St. 3rd Floor		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43215	M 0 3	D 0 9	Y 1 0	Amount 250.00	
Full Name of Contributor Ronald G. Linville				Registration Number, if PAC			
Street Address 2371 Sandover Rd,		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43220	M 0 3	D 1 8	Y 1 0	Amount 100.00	
Full Name of Contributor Lisa A. Gourley				Registration Number, if PAC			
Street Address 7699 Clear Creek Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Blacklick	State O H	Zip Code 43220	M 0 3	D 2 2	Y 1 0	Amount 1,000.00	

* 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 \$ 22,745.00