

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 4	D 0 4	Y 0 8	Amount 250.00	
Full Name of Contributor Jane Marie and Thomas Wheeler						Registration Number, if PAC	
Street Address 75 Lincoln Rd.			Employer/Occupation/Labor Organization* Best Effort / Best Effort			Form (Cash, Check, etc.) Check	
City Carmel	State N Y	Zip Code 10512	M 0 4	D 0 4	Y 0 8	Amount 250.00	
Full Name of Contributor Frank Cipriano						Registration Number, if PAC	
Street Address P.O. Box 06354			Employer/Occupation/Labor Organization* Real Estate / Land Network			Form (Cash, Check, etc.) Online Contribu	
City Columbus	State O H	Zip Code 43206	M 0 4	D 0 7	Y 0 8	Amount 250.00	
Full Name of Contributor Fraternal Order of Police Political Education Fund						Registration Number, if PAC LA 198	
Street Address 6800 Shrock Hill Ct.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43229	M 0 4	D 0 7	Y 0 8	Amount 250.00	
Full Name of Contributor The Raphael Company						Registration Number, if PAC	
Street Address 444 South Front St.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0 5	D 1 9	Y 0 8	Amount 1,000.00	
Full Name of Contributor Benjamin Sasse						Registration Number, if PAC	
Street Address 7101 Brightwood Drive			Employer/Occupation/Labor Organization* Lawyer/Tucker Ellis & West LLP			Form (Cash, Check, etc.) Online Contribu	
City Concord	State O H	Zip Code 44077	M 0 6	D 1 0	Y 0 8	Amount 100.00	
Full Name of Contributor The Huntington Bancshares Incorporated						Registration Number, if PAC PAC C00165589	
Street Address 41 South High St.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0 6	D 1 0	Y 0 8	Amount 250.00	
Full Name of Contributor Press Southworth III						Registration Number, if PAC	
Street Address One Miranova Place, Suite 1205			Employer/Occupation/Labor Organization* Ohio Citizens for the Arts and Foundation			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0 6	D 2 6	Y 0 8	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 \$ 2,450.00