

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends for Ginther</b>							
Full Name of Contributor <b>Jacob Roehl</b>					Registration Number, if PAC		
Street Address <b>1784 Canvasback Lane</b>		Employer/Occupation/Labor Organization* <b>CBRE / Real Estate Analyst</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>1   0</b>	D <b>2   7</b>	Y <b>0   7</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>Sean Mentel</b>					Registration Number, if PAC		
Street Address <b>1629 Elmwood Ave.</b>		Employer/Occupation/Labor Organization* <b>The Law Offices of Sean Mentel / Lawyer</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43212</b>	M <b>1   0</b>	D <b>2   7</b>	Y <b>0   7</b>	Amount <b>150.00</b>	
Full Name of Contributor <b>New Albany PAC</b>					Registration Number, if PAC <b>C00382432</b>		
Street Address <b>103 N. 3rd St.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>1   0</b>	D <b>2   7</b>	Y <b>0   7</b>	Amount <b>500.00</b>	
Full Name of Contributor <b>Michael Witwer</b>					Registration Number, if PAC		
Street Address <b>1050 Thorndale Dr.</b>		Employer/Occupation/Labor Organization* <b>Metcalf and Eddy Aecom / Planner</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Akron</b>	State <b>O   H</b>	Zip Code <b>44320</b>	M <b>1   0</b>	D <b>2   7</b>	Y <b>0   7</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>David Bingham</b>					Registration Number, if PAC		
Street Address <b>8000 Storrow Dr.</b>		Employer/Occupation/Labor Organization* <b>Best Effort/ Best Effort</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Westerville</b>	State <b>O   H</b>	Zip Code <b>43081</b>	M <b>1   0</b>	D <b>2   7</b>	Y <b>0   7</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Gregory Stacy</b>					Registration Number, if PAC		
Street Address <b>9189 State Route 730</b>		Employer/Occupation/Labor Organization* <b>Best Effort/ Best Effort</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Clarksville</b>	State <b>O   H</b>	Zip Code <b>45113</b>	M <b>1   0</b>	D <b>2   7</b>	Y <b>0   7</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Michael Welch</b>					Registration Number, if PAC		
Street Address <b>195 Sylvan Dr.</b>		Employer/Occupation/Labor Organization* <b>Metcalf and Eddy Aecom / Consultant</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Delaware</b>	State <b>O   H</b>	Zip Code <b>43015</b>	M <b>1   0</b>	D <b>2   7</b>	Y <b>0   7</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Andrew Madison</b>					Registration Number, if PAC		
Street Address <b>2476 Bexley Park Rd.</b>		Employer/Occupation/Labor Organization* <b>RS Garek &amp; Associates / Owner</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Bexley</b>	State <b>O   H</b>	Zip Code <b>43209</b>	M <b>1   0</b>	D <b>2   7</b>	Y <b>0   7</b>	Amount <b>500.00</b>	

\* 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 \$ 1,420.00