

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor Don Casto					Registration Number, if PAC		
Street Address 191 West Nationwide Blvd, Suite 200		Employer/Occupation/Labor Organization* Casto Company / Partner		M 0	D 3	Y 2	Amount 250.00
City Columbus		State O	Zip Code H 43215	Form(Cash,Check,etc) Check			
Full Name of Contributor Edwin Hogan					Registration Number, if PAC		
Street Address 2727 Mitzi Dr.		Employer/Occupation/Labor Organization* New Visions Group / Presid		M 0	D 3	Y 2	Amount 250.00
City Columbus		State O	Zip Code H 43209	Form(Cash,Check,etc) Check			
Full Name of Contributor Manoj Sethi					Registration Number, if PAC		
Street Address 7674 Johntimm Ct.		Employer/Occupation/Labor Organization* DLZ / Executive		M 0	D 3	Y 2	Amount 250.00
City Dublin		State O	Zip Code H 43017	Form(Cash,Check,etc) Check			
Full Name of Contributor Kevin Bainter					Registration Number, if PAC		
Street Address 2092 Wagon Trail Dr.		Employer/Occupation/Labor Organization* DLZ / Vice President		M 0	D 3	Y 2	Amount 250.00
City Reynoldsburg		State O	Zip Code H 43068	Form(Cash,Check,etc) Check			
Full Name of Contributor A. James Siebert					Registration Number, if PAC		
Street Address 1040 Bluesail Dr.		Employer/Occupation/Labor Organization* DLZ / Vice President		M 0	D 3	Y 2	Amount 250.00
City Westerville		State O	Zip Code H 43081	Form(Cash,Check,etc) Check			
Full Name of Contributor Tobias Illoka					Registration Number, if PAC		
Street Address 6677 Spring Run Dr.		Employer/Occupation/Labor Organization* Dynotech / President		M 0	D 3	Y 2	Amount 250.00
City Westerville		State O	Zip Code H 43082	Form(Cash,Check,etc) Check			
Full Name of Contributor R. Michael Taylor					Registration Number, if PAC		
Street Address 1643 Demaret Lane		Employer/Occupation/Labor Organization* Government Initiatives Gro		M 0	D 3	Y 2	Amount 250.00
City Columbus		State O	Zip Code H 43228	Form(Cash,Check,etc) Check			

* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

Total expenditures this event

Page Total \$ 1,750.00