

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther							
Full Name of Contributor David B. Perry					Registration Number, if PAC		
Street Address 6651 Dutch Lane Rd.		Employer/Occupation/Labor Organization* The David Perry Co. / President			Form (Cash, Check, etc.) Check		
City Johnstown	State O H	Zip Code 43031	M 0 4	D 3 0	Y 0 7	Amount 250.00	
Full Name of Contributor I.B.E.W. - C.O.P.E.					Registration Number, if PAC 8026		
Street Address 900 Seventh St. NW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Washington	State D C	Zip Code 20001	M 0 4	D 3 0	Y 0 7	Amount 1,000.00	
Full Name of Contributor Carol Wolfenbarger					Registration Number, if PAC		
Street Address 210 Preston Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43209	M 0 4	D 3 0	Y 0 7	Amount 50.00	
Full Name of Contributor Kevin Durkin					Registration Number, if PAC		
Street Address 471 East Broad St., Suite 1100		Employer/Occupation/Labor Organization* Kevin Durkin / Attorney-at-law			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 3 0	Y 0 7	Amount 250.00	
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)]