

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Ginther						
Full Name of Contributor PolicyWorks LLC				Registration Number, if PAC		
Street Address 155 W. Main Street Suite 1704		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 0 9	D 2 9	Y 0 8	Amount 500.00
Full Name of Contributor James Bunsey				Registration Number, if PAC		
Street Address 5377 Rustic Hills West		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Medina	State O H	Zip Code 44258	M 0 9	D 2 9	Y 0 8	Amount 1,000.00
Full Name of Contributor Joseph Rose				Registration Number, if PAC		
Street Address 22 W. 26th Street 11th Floor		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City New York	State N Y	Zip Code 10010	M 1 0	D 0 3	Y 0 8	Amount 2,000.00
Full Name of Contributor Civil Engineers for a Civil Government				Registration Number, if PAC		
Street Address 12855 Wheaton Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pickerington	State O H	Zip Code 43147	M 1 0	D 0 3	Y 0 8	Amount 1,000.00
Full Name of Contributor Brian P. Kinzelman				Registration Number, if PAC		
Street Address 4200 Randmore Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Upper Arlington	State O H	Zip Code 43220	M 1 0	D 1 7	Y 0 8	Amount 200.00
Full Name of Contributor NISOURCE Inc.				Registration Number, if PAC PAC C00061979		
Street Address 200 Civic Center Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 1 0	D 3 0	Y 0 8	Amount 250.00
Full Name of Contributor Columbus Apartment Association				Registration Number, if PAC PAC #OH 146		
Street Address 1225 Dublin Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 1 1	D 2 2	Y 0 8	Amount 500.00
Full Name of Contributor Wayne A. Garland				Registration Number, if PAC		
Street Address 492 Windwillow Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Powell	State O H	Zip Code 43065	M 1 1	D 2 2	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)]