

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends for Ginther</b>							
Full Name of Contributor <b>Charlotte Hickcox</b>					Registration Number, if PAC		
Street Address <b>1595 Roxbury Rd., Apt. F</b>		Employer/Occupation/Labor Organization* <b>Ohio EPA / Legislative Lia</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>75.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43212</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Adam Trautner</b>					Registration Number, if PAC		
Street Address <b>1208 Sanctuary Place</b>		Employer/Occupation/Labor Organization* <b>The Stonehenge Co. / Finar</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>75.00</b>
City <b>Gahanna</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43230</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Re:Organize, LLC</b>					Registration Number, if PAC		
Street Address <b>741 Mohawk St.</b>		Employer/Occupation/Labor Organization* <b></b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Justin Nigro</b>					Registration Number, if PAC		
Street Address <b>1331 Thayer Ave</b>		Employer/Occupation/Labor Organization* <b>Best Effort / Best Effort</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Ashtabula</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>44004</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Linda Lacloche</b>					Registration Number, if PAC		
Street Address <b>6056 Hilddenboro Dr.</b>		Employer/Occupation/Labor Organization* <b>City of Columbus / Office c</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Dublin</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Kennethia Hardin</b>					Registration Number, if PAC		
Street Address <b>1516 Felix Dr.</b>		Employer/Occupation/Labor Organization* <b>City of Columbus/ Office c</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43207</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Matthew Gledhill</b>					Registration Number, if PAC		
Street Address <b>460 Vermont Place</b>		Employer/Occupation/Labor Organization* <b>The Ohio Senate / Legislati</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43201</b>	Form(Cash,Check,etc) <b>Check</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)]

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 \$ 400.00