

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Re-Elect Judge Frye Committee					
Full Name of Contributor Brent C. Taggart				Registration Number, if PAC	
Street Address 2069 Fairfax Rd.	Employer/Occupation/Labor Organization* Vorys; Attorney		M 0	D 2	Y 0
City Upper Arlington	State O	Zip Code H 43221	Form(Cash,Check,etc) Check		Amount 100.00
Full Name of Contributor Philip A. Brown				Registration Number, if PAC	
Street Address 1001 Highland Dr.	Employer/Occupation/Labor Organization* Attorney; Vorys		M 0	D 1	Y 3
City Columbus	State O	Zip Code H 43220	Form(Cash,Check,etc) Check		Amount 200.00
Full Name of Contributor John J. Kulewicz				Registration Number, if PAC	
Street Address 2104 Yorkshire Rd.	Employer/Occupation/Labor Organization* Attorney; Vorys		M 0	D 2	Y 0
City Columbus	State O	Zip Code H 43221	Form(Cash,Check,etc) Check		Amount 250.00
Full Name of Contributor Gary Saalman				Registration Number, if PAC	
Street Address 1401 Trentwood Rd.	Employer/Occupation/Labor Organization* Vorys; Attorney		M 0	D 2	Y 0
City Columbus	State O	Zip Code H 43221	Form(Cash,Check,etc) Check		Amount 250.00
Full Name of Contributor Thomas B. Ridgley				Registration Number, if PAC	
Street Address 52 East Gay St.	Employer/Occupation/Labor Organization* Vorys; Attorney		M 0	D 2	Y 0
City Columbus	State O	Zip Code H 43215	Form(Cash,Check,etc) Check		Amount 250.00
Full Name of Contributor Paula M. Brown *				Registration Number, if PAC	
Street Address 4634 Kingston Ct.	Employer/Occupation/Labor Organization* Attorney; Kravitz, Brown		M 0	D 2	Y 1
City Columbus	State O	Zip Code H 43220	Form(Cash,Check,etc) Check		Amount 150.00
Full Name of Contributor Portman, Foley & Flint LLP				Registration Number, if PAC	
Street Address 471 East Broad St., Suite 1820	Employer/Occupation/Labor Organization* Attorneys at Law		M 0	D 2	Y 0
City Columbus	State O	Zip Code H 43215	Form(Cash,Check,etc) Check		Amount 200.00

* 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)]

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 \$ 1,400.00