

# In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Re-Elect Judge Frye Committee</b>				
Full Name of Contributor <b>Kegler, Brown, Hill &amp; Ritter PAC *</b>		Employer, Occupation, Labor Organization* <b>Attorneys at Law</b>		Registration Number, if PAC <b>CP648</b>
Street Address <b>65 East State Street, Suite 1800</b>		Description of Item or Service <b>Expenses-Office Reception 05/05/10</b>		M   D   Y   Fair Market Value <b>0   5   0   5   1   0   \$28.37</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor <b>Javier H. Armengau, LPA *</b>		Employer, Occupation, Labor Organization* <b>Attorneys at Law</b>		Registration Number, if PAC
Street Address <b>857 South High Street</b>		Description of Item or Service <b>Food for Fundraiser 09/02/10</b>		M   D   Y   Fair Market Value <b>0   9   0   2   1   0   \$1,490.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43206</b>	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$1,518.37