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R		C.	35	17	.10

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In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Re-Elect Judge Frye Committee					
Full Name of Contributor	Employer Occup	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Kegler, Brown, Hill & Ritter PAC *	Attorneys at Law		CP648		
Street Address		Description of Item or Service		Y Fair Market Value	
65 East State Street, Suite 1800	Expenses-Office Reception 05/05/10		0 5 0 5	1 0 \$28.37	
City	State Zip Code		Received at Fundraising Event?		
Columbus	OH	OH 43215		⊙ YES O NO	
Full Name of Contributor	Employer, Occup	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Javier H. Armengau, LPA *	Attorney	Attorneys at Law			
Street Address	Description of Item or Service		M D	Y Fair Market Value	
857 South High Street	Food for Fundraiser 09/02/10		0902	1 D \$1,490.00	
City	Stal te	Zip Code	Received at Func	draising Event?	
Columbus	OH	43206	O YES	O NO	
Full Name of Contributor	Employer, Occup	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Iter	m or Service	Mi D	Y Fair Market Value	
City	Stal te	Zip Code	Received at Fund	Iraising Event?	
	OH		O YES	O NO	
Full Name of Contributor	Employer, Occup	ation, Labor Organization*	Registration Nun	nber, if PAC	
Street Address	Description of Iter	in or Service	Mi D	Y Fair Market Value	
City	Stal te	Zip Code	Received at Fund	lraising Event?	
	OH		O YES	O NO	
Full Name of Contributor	Employer, Occup	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item or Service		Mr D	Y Fair Market Value	
City	Stal te OH	Zip Code	Received at Fund	_	
Full Name of Contributor		ation, Labor Organization*	O YES Registration Nun	NO NO	
	,	,			
Street Address	Description of Ite	m or Service	N€ D	Y Fair Market Value	
City	Sta te OH	Zip Code	Received at Func	Iraising Event?	
Full Name of Contributor	Employer, Occup	oation, Labor Organization*	Registration Nun	nber, if PAC	
Street Address	Description of Item or Service		M D	Y Fair Market Value	
City	Sta te	Zip Code	Received at Fund	draising Event?	
Full Name of Contributor	Employer, Occup	Employer, Occupation, Labor Organization*		nber, if PAC	
Street Address		Description of Item or Service		Y Fair Market Value	
City	Stal te OH	Zip Code	Received at Fund	draising Event?	

Page Total \$1,518.37

^{*} 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)]