## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Re-Elect Judge Frye Committee Full Name of Contributor Contributors from Form No. 31–E Street Address Employer/Occupation/Labor Organization* Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Full Name of Contributor Full Name of Contributor  Street Address Employer/Occupation/Labor Organization* Full Name of Contributor Full Name of	Name of Committee in Full				augustus egiptistasiona, makk				
Registration Number, if PAC   State   Zip Code   M   D   Y   Amount   Part   Cash, Check, etc.)									
Contributions from Form No. 31-B  Street Address    Employer/Occupation/Labor Organization*				Pagietro	tion Num	hor if DA	C		
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\* 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)]

Page Total \$ 26,800.00