## **Statement of Contributions Received**



Prescribed by Secretary of State 03/05

Name of Committee in Full	<u>·</u>			
ReElect Judge Frye Committee				
I Name of Contributor See Attached 31-A Spreadsheet			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization		Various Dates	Form (Cash, Check, etc.)
City	State OH	Zip Code	Mf D Y	Amount \$21,386.80
Full Name of Contributor	<del></del>	<del></del>	Registration Number, if	f PAC
See Attached 31-E Spreadsheet for June 2	:3, 2016 Fu	ındraiser		
Street Address	Employer/Occr	upation/Labor Organization		Form (Cash, Check, etc.)
City	State OH	Zip Code	0 6 2 3 1 6	Amount 5 \$10,542.15
Full Name of Contributor See Attached 31-E Spreadsheet for June 28, 2016 Fundraiser  Registration Number, if PAC				
Street Address	Employer/Occi	eupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	0 6 2 8 1	Amount 6 \$1,825.00
Full Name of Contributor See Attached 31-E Spreadsheet for June	29, 2016	Fundraiser	Registration Number, if	PAC
Street Address	Employer/Occu	rupation/Labor Organization		Form (Cash, Check, etc.)
City	State OH	Zip Code	0 6 2 9 1 6	Amount 53,110.00
Full Name of Contributor See Attached 31-E Spreadsheet for July 12	2, 2016 Fur	ndraiser	Registration Number, if	
Street Address	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.)
City	State OH	Zip Code	0 7 1 2 1 6	Amount 5 \$6,550.00
Full Name of Contributor See Attached 31-E Spreadsheet for July 21	1, 2016 Fur	ndraiser	Registration Number, it	PAC
Street Address	Employer/Occu	upation/Labor Organization		Form (Cash, Check, etc.)
City	State OH	Zip Code	0 7 2 1 1 6	Amount \$12,950.00
Full Name of Contributor See Attached 31-E Spreadsheet for Augus	t 21, 2016	Fundraiser	Registration Number, if	'PAC
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)
City	State OH	Zip Code	0 8 2 1 1 6	Amount \$ \$545.00
Full Name of Contributor See Attached 31-E Spreadsheet for Septer	nber 21, 2(	016 Fundraiser	Registration Number, if	PAC
Street Address	Employer/Occu	upation/Labor Organization		Form (Cash, Check, etc.)
City	State OH	Zip Code	0 9 2 1 1 1 6	Amount 6 \$2,978.97

Page Total \$59,887.92

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 also appear. {R.C. 3517,10(B)(4)}