Statement of Contributions Received at a Social or Fund-Raising Event

Event Date 9/2/10
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Prescribed by Secretary of State 03/05

		tary of State 03/03		
Name of Committee in Full Re-Elect Judge Frye Committee				
Full Name of Contributor			Registration Number, if PAC	
Frederick D. Benton, Jr. *				
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	
786 South Front Street, Suite 204	Attorney		0 9 0 2 1 0 \$150.00	
City Columbus	Staj te OH	Zip Code 43206	Form (Cash, Check, etc.)	
Full Name of Contributor		40200	Registration Number, if PAC	
Nancy K. Wonnell *			registration (values), 17770	
Street Address	Employer/Occur	pation/Labor Organization*	M D Y Amount	
330 South High Street	Atty; Wonnell and Wonnell		0 9 0 2 1 0 \$100.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
Full Name of Contributor E. Scott Shaw *			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	
500 South Front Street, Suite 130	Attorne		0 9 0 2 1 0 \$100.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH_	43215	Check	
Full Name of Contributor Juan Jose Perez			Registration Number, if PAC	
Street Address			M D Y Amount	
149 Glen Abbey Court	Employer/Occupation/Labor Organization* Atty; Perez & Morris LLC		0 9 0 2 1 0 \$200.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Powell	OH	43065	Check	
Full Name of Contributor Roger M. Koeck *	'		Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	
6257 Emberwood Road	Attorney		0 9 0 2 1 0 \$150.00	
City Dublin	Star te OH	Zip Code 43017	Form (Cash, Check, etc.) Check	
Full Name of Contributor Troy B. Morris	· · · · · · · · · · · · · · · · · · ·	•	Registration Number, if PAC	
Street Address 5892 Baronscourt Way	Employer/Occupation/Labor Organization* Atty: Perez & Morris LLC		M D Y Amount \$150.00	
City Dublin	Stal te OH	Zip Code 43016	Form (Cash, Check, etc.) Check	
Full Name of Contributor Ross & Midian, LLC *	,		Registration Number, if PAC	
Street Address 133 East Livingston Avenue	Employer/Occupation/Labor Organization* Attorneys at Law		M D Y Amount 0 9 0 3 1 0 \$75.00	
City Columbus	Stal te OH	Zip Code 43215	Form (Cash, Check, etc.) Check	

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 \$\$925.00	

^{*} 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 also appear. [R.C. 3517.10(B)(4)]