

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full ReElect Judge Frye Committee												
Full Name of Contributor Robert Trafford		Employer, Occupation, Labor Organization*		Registration Number, if PAC								
Street Address 6 Alban Mews		Description of Item or Service expenses related to hosting a fundraiser		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>6</td> <td>2</td> <td>\$100.00</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	2	\$100.00
M	D	Y	Fair Market Value									
0	6	2	\$100.00									
City New Albany		State OH	Zip Code 43212	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO								
Full Name of Contributor Tom Lininger		Employer, Occupation, Labor Organization*		Registration Number, if PAC								
Street Address 937 Oak St.		Description of Item or Service expenses related to hosting a fundraiser		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>8</td> <td>2</td> <td>\$64.40</td> </tr> </table>	M	D	Y	Fair Market Value	0	8	2	\$64.40
M	D	Y	Fair Market Value									
0	8	2	\$64.40									
City Columbus		State OH	Zip Code 43205	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO								
Full Name of Contributor Michelle Kazar		Employer, Occupation, Labor Organization*		Registration Number, if PAC								
Street Address 318 Western Dreamer Dr		Description of Item or Service expenses related to hosting a fundraiser		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>8</td> <td>2</td> <td>\$64.40</td> </tr> </table>	M	D	Y	Fair Market Value	0	8	2	\$64.40
M	D	Y	Fair Market Value									
0	8	2	\$64.40									
City Delaware		State OH	Zip Code 43015	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO								
Full Name of Contributor Baker & Hostetler LLP		Employer, Occupation, Labor Organization*		Registration Number, if PAC								
Street Address 65 E. State Street, Suite 2100		Description of Item or Service Expenses related to hosted fundraiser.		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>7</td> <td>1</td> <td>\$920.01</td> </tr> </table>	M	D	Y	Fair Market Value	0	7	1	\$920.01
M	D	Y	Fair Market Value									
0	7	1	\$920.01									
City Columbus		State OH	Zip Code 43215	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO								
Full Name of Contributor Scott & Nolder Law Firm, LPA		Employer, Occupation, Labor Organization*		Registration Number, if PAC								
Street Address 65 E. State Street, Suite 200		Description of Item or Service expenses related to hosting a fundraiser		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>7</td> <td>2</td> <td>\$679.84</td> </tr> </table>	M	D	Y	Fair Market Value	0	7	2	\$679.84
M	D	Y	Fair Market Value									
0	7	2	\$679.84									
City Columbus		State OH	Zip Code 43215	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO								
Full Name of Contributor Kathleen Trafford		Employer, Occupation, Labor Organization*		Registration Number, if PAC								
Street Address 6 Alban Mews		Description of Item or Service expenses related to hosting a fundraiser		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>6</td> <td>2</td> <td>\$348.72</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	2	\$348.72
M	D	Y	Fair Market Value									
0	6	2	\$348.72									
City New Albany		State OH	Zip Code 43215	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO								
Full Name of Contributor Bailey Cavalleri		Employer, Occupation, Labor Organization*		Registration Number, if PAC								
Street Address 10 W. Broad Street, Suite 2100		Description of Item or Service expenses related to hosting a fundraiser		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>6</td> <td>2</td> <td>\$751.14</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	2	\$751.14
M	D	Y	Fair Market Value									
0	6	2	\$751.14									
City Columbus		State OH	Zip Code 43215	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO								
Full Name of Contributor Ice Miller		Employer, Occupation, Labor Organization*		Registration Number, if PAC								
Street Address 250 West St. #700		Description of Item or Service expenses related to hosting a fundraiser		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>9</td> <td>2</td> <td>\$62.50</td> </tr> </table>	M	D	Y	Fair Market Value	0	9	2	\$62.50
M	D	Y	Fair Market Value									
0	9	2	\$62.50									
City Columbus		State OH	Zip Code 43215	Received at Fundraising Event? <input checked="" 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)]