31-E
R.C. 3517.10(B)

Event Date 2/16/2012
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full							
Committee to Retain Judge Reece							
Full Name of Contributor			**Registration Number, if PAC**				
Jarrod Frobose							
Street Address	**Employer/Occupation/Labor Organization***		**M**	**D**	**Y**	**Amount**	
165 Garden Road			02	16	12	100.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**				
Columbus	OH	43215	Cash				
Full Name of Contributor			**Registration Number, if PAC**				
The Owen Firm, LLC							
Street Address	**Employer/Occupation/Labor Organization***		**M**	**D**	**Y**	**Amount**	
5354 N. High Street			02	23	12	150.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**				
Columbus	OH	43214	Check				
Full Name of Contributor			**Registration Number, if PAC**				
Carpenter Lipps & Leland LLP							
Street Address	**Employer/Occupation/Labor Organization***		**M**	**D**	**Y**	**Amount**	
280 N. High Street, Suite 1300			02	24	12	150.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**				
Columbus	OH	43215	Check				
Full Name of Contributor			**Registration Number, if PAC**				
Neil Rosenberg							
Street Address	**Employer/Occupation/Labor Organization***		**M**	**D**	**Y**	**Amount**	
400 S. 5th Street, Suite 301			02	24	12	150.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**				
Columbus	OH	43215	Check				
Full Name of Contributor			**Registration Number, if PAC**				
Diane M. Menashe Co., LPA							
Street Address	**Employer/Occupation/Labor Organization***		**M**	**D**	**Y**	**Amount**	
536 S. Wall Street, Suite 300			02	24	12	150.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**				
Columbus	OH	43215	Check				
Full Name of Contributor			**Registration Number, if PAC**				
Philip J. Saken							
Street Address	**Employer/Occupation/Labor Organization***		**M**	**D**	**Y**	**Amount**	
5646 Blandon Run			02	16	12	100.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**				
Columbus	OH	43230	Check				
Full Name of Contributor			**Registration Number, if PAC**				
Squire Sanders & Dempsey LLP PAC			C00444935				
Street Address	**Employer/Occupation/Labor Organization***		**M**	**D**	**Y**	**Amount**	
1201 Pennsylvania Ave., NW, Suite 500			02	23	12	2,000.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**				
Washington	DC	20004	Check				

* Required for contributions from individuals over $100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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)]

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 $ 2,800.00