

Event Date	<u>2-11-10</u>
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Re-Elect Judge Frye Committee					
Full Name of Contributor Blaise Baker *				Registration Number, if PAC	
Street Address 600 S. High St., Suite 201	Employer/Occupation/Labor Organization* Attorney		M 0	D 2	Y 11
City Columbus	State O	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 250.00
Full Name of Contributor Connor, Evans & Hafenstein LLP *				Registration Number, if PAC	
Street Address 501 S. High St.	Employer/Occupation/Labor Organization* Attorneys at Law		M 0	D 2	Y 11
City Columbus	State O	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 150.00
Full Name of Contributor Carlile, Patchen & Murphy LLP				Registration Number, if PAC	
Street Address 266 East Broad St.	Employer/Occupation/Labor Organization* Attorneys at Law		M 0	D 1	Y 28
City Columbus	State O	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 250.00
Full Name of Contributor Barnhart Law Office, LLC				Registration Number, if PAC	
Street Address 595 1/2 S. Third St.	Employer/Occupation/Labor Organization* Attorneys at Law		M 0	D 2	Y 11
City Columbus	State O	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 150.00
Full Name of Contributor Charles R. Saxbe				Registration Number, if PAC	
Street Address 65 E. State St., Suite 1000	Employer/Occupation/Labor Organization* Chester Willcox & Saxbe		M 0	D 2	Y 11
City Columbus	State O	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 250.00
Full Name of Contributor John A. Gleason				Registration Number, if PAC	
Street Address 7532 Ogden Woods Blvd.	Employer/Occupation/Labor Organization* Crawford Hoying Ltd.		M 0	D 2	Y 11
City New Albany	State O	Zip Code 43054	Form(Cash,Check,etc) Check		Amount 100.00
Full Name of Contributor Stanley B. Dritz				Registration Number, if PAC	
Street Address 50 W. Broad St., Suite 2200	Employer/Occupation/Labor Organization* Attorney		M 0	D 2	Y 11
City Columbus	State O	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 200.00

* 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 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 \$ 1,350.00