

Event Date	<u>2-11-10</u>
Page	<u>13</u>

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 D. Wesley Newhouse				Registration Number, if PAC		
Street Address 2674 Henthorne Dr.	Employer/Occupation/Labor Organization* Attorney; Newhouse, Prop		M 0	D 2	Y 11	Amount 200.00
City Upper Arlington	State O H	Zip Code 43221	Form(Cash,Check,etc) Check			
Full Name of Contributor Stephen C. Fitch				Registration Number, if PAC		
Street Address 885 Robbins Way	Employer/Occupation/Labor Organization* Chester Willcox Saxbe		M 0	D 2	Y 11	Amount 200.00
City Worthington	State O H	Zip Code 43085	Form(Cash,Check,etc) Check			
Full Name of Contributor John Fitch				Registration Number, if PAC		
Street Address 4200 Regent St., Suite 200	Employer/Occupation/Labor Organization* Attorney		M 0	D 2	Y 11	Amount 250.00
City Columbus	State O H	Zip Code 43219	Form(Cash,Check,etc) Check			
Full Name of Contributor The Behal Law Group LLC				Registration Number, if PAC		
Street Address 501 S. High St.	Employer/Occupation/Labor Organization* Attorneys at Law		M 0	D 2	Y 10	Amount 350.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check			
Full Name of Contributor Schottenstein, Zox & Dunn				Registration Number, if PAC		
Street Address 250 West St.	Employer/Occupation/Labor Organization* Attorneys at Law		M 0	D 1	Y 22	Amount 1,000.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check			
Full Name of Contributor R. William Meeks *				Registration Number, if PAC		
Street Address 511 S. High St.	Employer/Occupation/Labor Organization* Attorney		M 0	D 2	Y 11	Amount 250.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check			
Full Name of Contributor Taft, Stettinius & Hollister				Registration Number, if PAC		
Street Address 425 Walnut St., Suite 1800	Employer/Occupation/Labor Organization* Attorneys at Law		M 0	D 2	Y 02	Amount 350.00
City Cincinnati	State O H	Zip Code 45202	Form(Cash,Check,etc) Check			

* 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 \$ 2,600.00