

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Judge Lawrence A. Belskis Committee									
Full Name of Contributor R. Matthew Hamilton						Registration Number, if PAC			
Street Address 1919 Cambridge Blvd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Upper Arlington		State OH	Zip Code 43212		M 1	D 0	Y 0	Amount \$500.00	
Full Name of Contributor John Oleyar**						Registration Number, if PAC			
Street Address 833 Eastwind Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville		State OH	Zip Code 43081		M 1	D 0	Y 0	Amount \$200.00	
Full Name of Contributor Joel R. Campbell						Registration Number, if PAC			
Street Address 575 South Third St.			Employer/Occupation/Labor Organization* Attorney				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 1	D 0	Y 0	Amount \$50.00	
Full Name of Contributor Robert E. Sexton						Registration Number, if PAC			
Street Address 580 S. High St., #130			Employer/Occupation/Labor Organization* Attorney				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 1	D 0	Y 0	Amount \$500.00	
Full Name of Contributor John Lewis						Registration Number, if PAC			
Street Address 7300 James River Close			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City New Albany		State OH	Zip Code 43054		M 1	D 0	Y 0	Amount \$50.00	
Full Name of Contributor Joseph O. Bull						Registration Number, if PAC			
Street Address 4156 Checkerberry Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Hilliard		State OH	Zip Code 43026		M 1	D 0	Y 0	Amount \$50.00	
Full Name of Contributor Joel M. Altschule						Registration Number, if PAC			
Street Address 772 Fenway Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City New Albany		State OH	Zip Code 43054		M 1	D 0	Y 0	Amount \$100.00	
Full Name of Contributor William S. Fannin						Registration Number, if PAC			
Street Address 424 Beecher Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43230		M 1	D 0	Y 0	Amount \$100.00	

* 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)]

Page Total **\$1,550.00**

**Court Appointee who may have received in excess of \$250 in aggregate compensation from Court appointments. [Canon 7 (C)(2)(a)(ii)]