

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 E. William Butler							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City		State OH		Zip Code		M 1		D 0	
						Y 1		Amount \$500.00	
Full Name of Contributor Benjamin J. Carignan							Registration Number, if PAC		
Street Address 7705 Stow Acres Place				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Pickerington		State OH		Zip Code 43147		M 1		D 0	
						Y 1		Amount \$500.00	
Full Name of Contributor Natalie M. Carignan							Registration Number, if PAC		
Street Address 7705 Stow Acres Place				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Pickerington		State OH		Zip Code 43147		M 1		D 0	
						Y 1		Amount \$500.00	
Full Name of Contributor Beau M. Wickham							Registration Number, if PAC		
Street Address 5533 Madrid Drive				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Westerville		State OH		Zip Code 43081		M 1		D 0	
						Y 1		Amount \$250.00	
Full Name of Contributor John J. Frencho, II							Registration Number, if PAC		
Street Address 182 Warren St.				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43215		M 1		D 0	
						Y 1		Amount \$100.00	
Full Name of Contributor Joseph C. Iannarino							Registration Number, if PAC		
Street Address 374 South Chesterfield Rd.				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43209		M 1		D 0	
						Y 1		Amount \$100.00	
Full Name of Contributor Calvin F. Hamrick, III							Registration Number, if PAC		
Street Address 107 East Moor Blvd.				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43209		M 1		D 0	
						Y 1		Amount \$50.00	
Full Name of Contributor Nancy A. Brown							Registration Number, if PAC		
Street Address 6900 E. Livingston Ave.				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Reynoldsburg		State OH		Zip Code 43068		M 1		D 0	
						Y 1		Amount \$500.00	

* 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 **\$2,500.00**

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