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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	Registration Number, if PAC			
W.R. Chambers				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
5993 Macewen Ct.				Check
City Dublin	State OH	Zip Code 43017	0 5 D 9 O 8	Amount \$500.00
Full Name of Contributor	Registration Number, if	PAC		
Donal H. Malenick				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
4461 Waysie Dr.				Check
City	State	Zip Code	M D Y	Amount
Naples	FL	34119	050908	
Full Name of Contributor Stephen S. Wittmann	Registration Number, if PAC			
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
3383 Mann road				Check
City	State	Zip Code 43004	M D Y	Amount \$500.00
Blacklick	ОН	43004	0 5 0 9 0 8	1
Full Name of Contributor			Registration Number, if OJ108	PAC
Vorys Sater Seymour & Pease, LLP	03100	****		
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
52 E. Gay St.	State	7:- C-1-	M D Y	Check
City Columbus	OH	Zip Code 43215	0 5 0 9 0 8	\$1,000.00
Full Name of Contributor Frank Wojcik			Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
4173 Schirtzinger Road				Check
City	State	Zip Code	M D Y	Amount
Hilliard	OH	43026	0 5 0 9 0 8	1 *******
Full Name of Contributor	Registration Number, if	PAC		
Chester, Willcox & Saxbe		OH843		
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
65 E. State St., Ste. 1000	6.3	7. 0.1		Check
City Columbus	State OH	Zip Code 43215	0 5 0 9 0 8	Amount \$500.00
Full Name of Contributor			Registration Number, if	PAC
James Petropoulos**				
i i		pation/Labor Organization*		Form (Cash, Check, etc.)
170 Marconi Blvd.	0.1	7: 0 1		Check
City Columbus	State OH	Zip Code 43215	0 5 0 9 0 8	Amount \$500.00
Full Name of Contributor Lou Petropoulos			Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
170 Marconi Blvd.				Check
City Columbus	State OH	Zip Code 43215	M D Y O S O S O S O S O S O S O S O S O S O	Amount \$500.00
Cotambuo	011	102.10	0 0 0 0 0	Ψ500.00

Page Total \$4,500.00

^{*} 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)]