

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 Dr. Robert J. Weiler, Esq.**						Registration Number, if PAC	
Street Address 41 S. High St., Ste. 1010			Employer/Occupation/Labor Organization* The Robert Weiler Co., Appraiser			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215	M 1	D 1	Y 1	Amount \$500.00
Full Name of Contributor Zelma M. Morris						Registration Number, if PAC	
Street Address 111 Riverview Park Drive			Employer/Occupation/Labor Organization* 			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43214	M 1	D 1	Y 5	Amount \$500.00
Full Name of Contributor John J. Chester, Esq.						Registration Number, if PAC	
Street Address 65 East State St., Ste. 1000			Employer/Occupation/Labor Organization* Chester, Wilcox & Saxbe			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215	M 1	D 1	Y 6	Amount \$500.00
Full Name of Contributor Timothy G. Crowley, Esq.						Registration Number, if PAC	
Street Address 100 W. Weisheimer Rd.			Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43214	M 1	D 1	Y 6	Amount \$100.00
Full Name of Contributor Jack G. Gibbs, Jr., Esq.**						Registration Number, if PAC	
Street Address 233 S. High St., Ste. 208			Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215	M 1	D 1	Y 6	Amount \$300.00
Full Name of Contributor James A. Hardgrove, Esq.**						Registration Number, if PAC	
Street Address 4658 Slate Ridge Blvd.			Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Reynoldsburg		State OH	Zip Code 43068	M 1	D 1	Y 6	Amount \$300.00
Full Name of Contributor Marcia J. Horvath**						Registration Number, if PAC	
Street Address 5734 Southbridge Lane			Employer/Occupation/Labor Organization* Independent Adoption Assessor			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43213	M 1	D 1	Y 6	Amount \$300.00
Full Name of Contributor C. Coleman Irwin, Esq.						Registration Number, if PAC	
Street Address 656 S. Third St.			Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43206	M 1	D 1	Y 6	Amount \$300.00

* 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)]

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