

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 James A. Deer						Registration Number, if PAC			
Street Address 45490 Brookview Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Upper Sandusky		State OH	Zip Code 43351		M 1	D 0	Y 1 6 0 8	Amount \$250.00	
Full Name of Contributor Misty H. Aldrich						Registration Number, if PAC			
Street Address 36 N. Cassingham Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43209		M 1	D 0	Y 1 6 0 8	Amount \$250.00	
Full Name of Contributor Jane Grimm Minton						Registration Number, if PAC			
Street Address 617 Hartford St.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Worthington		State OH	Zip Code 43085		M 1	D 0	Y 1 6 0 8	Amount \$200.00	
Full Name of Contributor David B. Hornbeck						Registration Number, if PAC			
Street Address 847 Gatehouse Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43235		M 1	D 0	Y 1 6 0 8	Amount \$250.00	
Full Name of Contributor Richard D. Bringardner**						Registration Number, if PAC			
Street Address 4836 Lytfield Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Dublin		State OH	Zip Code 43017		M 1	D 0	Y 1 6 0 8	Amount \$250.00	
Full Name of Contributor Gary W. Lyons						Registration Number, if PAC			
Street Address 336 S. High St.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43215		M 1	D 0	Y 1 6 0 8	Amount \$200.00	
Full Name of Contributor Donna Buckley						Registration Number, if PAC			
Street Address 4129 Maystar Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Hilliard		State OH	Zip Code 43026		M 1	D 0	Y 1 6 0 8	Amount \$100.00	
Full Name of Contributor Larry C. Walters						Registration Number, if PAC			
Street Address 3875 Hidden Cove Circle			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Lewis Center		State OH	Zip Code 43035		M 1	D 0	Y 1 6 0 8	Amount \$150.00	

* 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 **\$1,650.00**

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