

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 Edwin L. Overmyer						Registration Number, if PAC	
Street Address 2245 North Bank Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 3	Amount \$100.00	
Full Name of Contributor Mark E. Phillips						Registration Number, if PAC	
Street Address 8153 Rookery Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43082	M 0	D 9	Y 3	Amount \$100.00	
Full Name of Contributor R. Douglas Wrightsel						Registration Number, if PAC	
Street Address 1851 Jewett Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	M 0	D 9	Y 3	Amount \$100.00	
Full Name of Contributor Frederick W. Good						Registration Number, if PAC	
Street Address 115 Colonial Way Circle			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43235	M 0	D 9	Y 3	Amount \$500.00	
Full Name of Contributor Theodore J. Good						Registration Number, if PAC	
Street Address 165 High Bluff Blvd, Apt. 407			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43235	M 0	D 9	Y 3	Amount \$500.00	
Full Name of Contributor Margaret V. Good						Registration Number, if PAC	
Street Address 115 Colonial Way Circle			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43235	M 0	D 9	Y 3	Amount \$500.00	
Full Name of Contributor Joycelyn Good						Registration Number, if PAC	
Street Address 7653 Cherry Field Place			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43235	M 0	D 9	Y 3	Amount \$500.00	
Full Name of Contributor Lisa D. Moore						Registration Number, if PAC	
Street Address 34 Tulane Rd., Apt. A			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43202	M 0	D 9	Y 3	Amount \$50.00	

* 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 **\$2,350.00**

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