

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 Mark D. Jordan						Registration Number, if PAC			
Street Address 875 Lindworth Rd. E.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43235		M 1		D 0	
						Y 0		Amount \$350.00	
Full Name of Contributor Richard S. Lovering						Registration Number, if PAC			
Street Address 7754 Arboretum Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City New Albany		State OH		Zip Code 43054		M 1		D 0	
						Y 0		Amount \$50.00	
Full Name of Contributor Susan L. Katherman						Registration Number, if PAC			
Street Address 325 Action Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43214		M 1		D 0	
						Y 0		Amount \$50.00	
Full Name of Contributor Charles H. McClenaghan						Registration Number, if PAC			
Street Address 6458 Moors Place West			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State OH		Zip Code 43017		M 1		D 0	
						Y 0		Amount \$100.00	
Full Name of Contributor Nancy Metcalf						Registration Number, if PAC			
Street Address 3158 Santorini Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Naples		State FL		Zip Code 34119		M 1		D 0	
						Y 0		Amount \$100.00	
Full Name of Contributor Steven A. Miller						Registration Number, if PAC			
Street Address 6444 Darling Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Blacklick		State OH		Zip Code 43004		M 1		D 0	
						Y 0		Amount \$50.00	
Full Name of Contributor Michael J. Platte						Registration Number, if PAC			
Street Address 715 Ulverston Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna		State OH		Zip Code 43230		M 1		D 0	
						Y 0		Amount \$50.00	
Full Name of Contributor Robert L. Ratchford, Jr.						Registration Number, if PAC			
Street Address 1414 Reynoldsburg New Albany Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Blacklick		State OH		Zip Code 43004		M 1		D 0	
						Y 0		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 **\$800.00**

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