

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 John F. Finn					Registration Number, if PAC		
Street Address 3641 Interchange Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43204	M 1	D 0	Y 2	Amount \$200.00	
Full Name of Contributor Robert E.W. Sander					Registration Number, if PAC		
Street Address 2019 Autumn Wind Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 1	D 0	Y 2	Amount \$200.00	
Full Name of Contributor J. Corey Colombo					Registration Number, if PAC		
Street Address 3381 Ridge Gap Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Constance R. Page	State OH	Zip Code 43221	M 1	D 0	Y 2	Amount \$50.00	
Full Name of Contributor Pamela Benson					Registration Number, if PAC		
Street Address 732 Trapp Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor Susan E. Boyle					Registration Number, if PAC		
Street Address 1225 Brittany Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 1	D 0	Y 2	Amount \$250.00	
Full Name of Contributor Samuel M. Pipino					Registration Number, if PAC		
Street Address 789 Chelsea Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 1	D 0	Y 2	Amount \$100.00	
Full Name of Contributor Susan E. Hughes					Registration Number, if PAC		
Street Address 4319 Fairoaks Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43214	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor Alicia E. Zambelli					Registration Number, if PAC		
Street Address 781 Southbluff DRive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State OH	Zip Code 43082	M 1	D 0	Y 2	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 **\$1,850.00**

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