Page 10

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Judge Lawrence A. Belskis Comm	ittee				
Full Name of Contributor Robert B. Barnett, Jr.			Registration Number, if PAC		
		*	L	Form (Cook Chook etc.)	
Street Address 5087 Oakmont Place	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43082	0 6 1 9 0 8	Amount \$200.00	
Full Name of Contributor			Registration Number, if PAC		
Julie M. Barnett					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
5087 Oakmont Place				Check	
City	State	Zip Code	M D Y	Amount	
Westerville	OH	43082	061908	\$200.00	
Full Name of Contributor Mary Wolfe Crall				Registration Number, if PAC	
Street Address	Employer/Occu	pation/Labor Organization*	Emmany and a state of the state	Form (Cash, Check, etc.)	
317 South Dawson Ave.				Check	
City Columbus	State OH	Zip Code 43209	$\begin{bmatrix} 0 & 6 & 1 & 9 & 0 & 8 \end{bmatrix}$	Amount \$250.00	
Full Name of Contributor			Registration Number, if I	PAC	
Harold C. Elliott					
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)	
8110 Hillingdon Dr.	0.1	7. 0.1		Check	
City Powell	State OH	Zip Code 43065	0 6 1 9 0 8	Amount \$500.00	
Full Name of Contributor Registration Number, if PAC William Heifner					
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)	
6215 Rocky Fork Pl.	Employer/Occu	patron/Laudi Organization		Check	
City	State	Zip Code	M D Y	Amount	
Gahanna	OH	43230	0 6 1 9 0 8	\$250.00	
Full Name of Contributor Edward C. Hertenstein			Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
7235 Biddick Court				Check	
City New Albany	State OH	Zip Code 43054	0 6 1 9 0 8	Amount \$250.00	
	01;	10001			
Full Name of Contributor Lawrence A. Hilsheimer			Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*		(CONTROL OF THE CONTROL OF THE CONTR	Form (Cash, Check, etc.)	
7278 Lambton Park Rd.				Check	
City New Albany	State OH	Zip Code 43054	0 6 1 9 0 8	Amount \$250.00	
Full Name of Contributor J. Harris Leshner			Registration Number, if	PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)		
336 S. High St.				Check	
City	State	Zip Code	M D Y	Amount	
Columbus	OH	43215	0 6 1 9 0 8	\$250.00	

Page Total \$2,150.00

^{*} 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)]