Page 13

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Judge Lawrence A. Belskis Co	mmittee				
Full Name of Contributor Sarah Bellows Upbin			Registration Number, if PAC		
Street Address 101 W. 81st St., Apt. 509	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City New York	State NY	Zip Code 10024	1 0 2 9 0 8	Amount \$500.00	
Full Name of Contributor Ohioans for Justice				Registration Number, if PAC OH 1308	
Street Address One Easton Oval, Ste. 550	Employer/Occupation/Labor Organization*		Perceptoporopa marinum podoveno estrecenim para un actual de la constitución de la consti	Form (Cash, Check, etc.) Check	
^{City} Columbus	State OH	Zip Code 43219	1 0 2 9 0 8	Amount \$500.00	
Full Name of Contributor Wrightsel & Wrightsel			Registration Number, if PAC		
Street Address 3300 Riverside Dr., Ste. 100	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	1 0 2 9 0 8	Amount \$250.00	
Full Name of Contributor Douglas A. Luper			Registration Number, if F	AC	
Street Address 2441 Plymouth Ave.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	1 0 2 9 0 8	Amount \$200.00	
Full Name of Contributor Franklin County Republican Part	y		Registration Number, if F	PAC	
Street Address 14 E. Gay St., 2nd Fl.	Employer/Occu	pation/Labor Organization*	Basel sold begroot of the group of the first and the sound of the sold of the	Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	1 0 3 0 0 8	Amount \$3,000.00	
Full Name of Contributor Weaver Law Offices, LLC			Registration Number, if PAC		
Street Address 3 S. High St.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Canal Winchester	State OH	Zip Code 43110	1 M 3 D D 8	Amount \$250.00	
Full Name of Contributor Recharge Ohio			Registration Number, if PAC OH 1368		
Street Address 890 Tree Bend Dr.	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
^{City} Westerville	State OH	Zip Code 43082	1 0 3 0 0 8	Amount \$1,000.00	
Full Name of Contributor Kenton R. Bowen			Registration Number, if F	AC	
Street Address 2396 W. Lane Ave.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	1 1 0 3 0 8	Amount	

Page Total \$5,950.00

^{*} 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)]