

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 William Crall						Registration Number, if PAC			
Street Address 317 South Dawson			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State OH	Zip Code 43209		M 0	D 7	Y 2	Amount \$500.00	
Full Name of Contributor Barbara Robins						Registration Number, if PAC			
Street Address 160 S. Merkle Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State OH	Zip Code 43207		M 0	D 7	Y 2	Amount \$500.00	
Full Name of Contributor Scott Schiff and Associates						Registration Number, if PAC			
Street Address 88 W. Main St.			Employer/Occupation/Labor Organization* Law Firm				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 7	Y 2	Amount \$500.00	
Full Name of Contributor Bernidine Fox						Registration Number, if PAC			
Street Address 3599 Alkire Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH	Zip Code 43123		M 0	D 7	Y 2	Amount \$250.00	
Full Name of Contributor Kyle Katz						Registration Number, if PAC			
Street Address 336 S. Columbia Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43209		M 0	D 7	Y 2	Amount \$100.00	
Full Name of Contributor Jeffrey D. Meyer						Registration Number, if PAC			
Street Address 195 S. Columbia Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State OH	Zip Code 43209		M 0	D 8	Y 0	Amount \$50.00	
Full Name of Contributor Solove Law Office						Registration Number, if PAC			
Street Address 79 Thurman Ave.			Employer/Occupation/Labor Organization* Law Firm				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43206		M 0	D 8	Y 1	Amount \$100.00	
Full Name of Contributor Kathryn B. Freiburger						Registration Number, if PAC			
Street Address 2435 Lane Woods Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43221		M 0	D 8	Y 2	Amount \$500.00	

* 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 **\$2,500.00**

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