

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 J. McLoughlin						Registration Number, if PAC	
Street Address 33 East Schrock Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	M 1	D 0	Y 2 0 0 8	Amount \$500.00	
Full Name of Contributor Christopher Maurer						Registration Number, if PAC	
Street Address 1709 Durbridge Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43229	M 1	D 0	Y 2 0 0 8	Amount \$50.00	
Full Name of Contributor Jeffrey A. Hall						Registration Number, if PAC	
Street Address 1998 Berkshire Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 1	D 0	Y 2 0 0 8	Amount \$100.00	
Full Name of Contributor Julie A. Bonasera						Registration Number, if PAC	
Street Address 245 John H. McConnell Blvd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 2 0 0 8	Amount \$500.00	
Full Name of Contributor Jason J. Wooldridge						Registration Number, if PAC	
Street Address 2329 Tucker Trail			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Lewis Center	State OH	Zip Code 43035	M 1	D 0	Y 2 2 0 8	Amount \$500.00	
Full Name of Contributor Phillip D. Nick						Registration Number, if PAC	
Street Address 7763 Fenway Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City New Albany	State OH	Zip Code 43054	M 1	D 0	Y 2 2 0 8	Amount \$500.00	
Full Name of Contributor Sharon L. Michael						Registration Number, if PAC	
Street Address 1447 Haft Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 2 8 0 8	Amount \$500.00	
Full Name of Contributor Chester, Willcox & Saxbe Good Government Fund						Registration Number, if PAC OH843	
Street Address 65 E. State St., Ste. 1000			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 2 8 0 8	Amount \$1,000.00	

* 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 **\$3,650.00**

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