

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 Mark E. Vannatta, Esq.							Registration Number, if PAC		
Street Address 2742 Kent Road				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M D Y 1 1 2 7 0 7		Amount \$300.00	
Full Name of Contributor R. Lamont Kaiser, Esq.							Registration Number, if PAC		
Street Address 15 Woodland Ave.				Employer/Occupation/Labor Organization* Rich, Crites & Dittmer, LLC			Form (Cash, Check, etc.) Check		
City Delaware		State OH		Zip Code 43015		M D Y 1 1 2 7 0 7		Amount \$100.00	
Full Name of Contributor Richard B. Igo, Esq.							Registration Number, if PAC		
Street Address 3300 Indianola Ave.				Employer/Occupation/Labor Organization* Igo & Igo Attorneys at Law			Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43214		M D Y 1 1 2 7 0 7		Amount \$100.00	
Full Name of Contributor Carlile, Patchen & Murphey, LLP							Registration Number, if PAC		
Street Address 366 East Broad St.				Employer/Occupation/Labor Organization* Law Firm			Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43215		M D Y 1 1 2 7 0 7		Amount \$3,000.00	
Full Name of Contributor Yale R. Levy, Esq.							Registration Number, if PAC		
Street Address 903 Eastwind Drive				Employer/Occupation/Labor Organization* Levy & Associates, LLC			Form (Cash, Check, etc.) Check		
City Westerville		State OH		Zip Code 43081		M D Y 1 1 2 7 0 7		Amount \$300.00	
Full Name of Contributor Kitrick & Lewis Co., L.P.A							Registration Number, if PAC		
Street Address 515 East Main St., Suite 515				Employer/Occupation/Labor Organization* Law Firm			Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43215		M D Y 1 1 2 7 0 7		Amount \$3,000.00	
Full Name of Contributor Roetzel & Andress							Registration Number, if PAC		
Street Address 222 South Main St.				Employer/Occupation/Labor Organization* Law Firm			Form (Cash, Check, etc.) Check		
City Akron		State OH		Zip Code 44308		M D Y 1 1 2 7 0 7		Amount \$1,000.00	
Full Name of Contributor Kevin Craine**							Registration Number, if PAC		
Street Address 2201 Riverside Dr.				Employer/Occupation/Labor Organization* Kincaid, Randall & Craine			Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M D Y 1 1 2 7 0 7		Amount \$300.00	

* 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)]

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

Page Total **\$8,100.00**