

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 Thomas N. Tripp							Registration Number, if PAC		
Street Address 5420 Clark State Rd.				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Gahanna		State OH		Zip Code 43230		M 0		D 8	
						Y 2		Amount \$500.00	
Full Name of Contributor Ellen L. Tripp							Registration Number, if PAC		
Street Address 5420 Clark State Rd.				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Gahanna		State OH		Zip Code 43230		M 0		D 8	
						Y 2		Amount \$500.00	
Full Name of Contributor Stanford M. Ackley							Registration Number, if PAC		
Street Address 695 Kenwick Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43209		M 0		D 8	
						Y 2		Amount \$500.00	
Full Name of Contributor Central Ohio Realtors Political Action Committee							Registration Number, if PAC		
Street Address 2700 Airport Dr.				Employer/Occupation/Labor Organization* PAC				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43219		M 0		D 8	
						Y 2		Amount \$2,500.00	
Full Name of Contributor Sharon Koon							Registration Number, if PAC		
Street Address 300 N. Drexel				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43209		M 0		D 8	
						Y 2		Amount \$500.00	
Full Name of Contributor Virginia A. Dykes							Registration Number, if PAC		
Street Address 6936 Lakebrook Blvd.				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43235		M 0		D 8	
						Y 2		Amount \$200.00	
Full Name of Contributor Thomas W. Hill							Registration Number, if PAC		
Street Address 7 Wiveliscombe				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City New Albany		State OH		Zip Code 43054		M 0		D 9	
						Y 0		Amount \$50.00	
Full Name of Contributor Schottenstein Zox & Dunn							Registration Number, if PAC 43215		
Street Address 250 West St.				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43215		M 0		D 9	
						Y 0		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 \$5,250.00

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