

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 Walter E. Dennis					Registration Number, if PAC		
Street Address 1797 Scioto Pointe Dr.		Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor Neil C. Sander					Registration Number, if PAC		
Street Address 8872 Cornwallis Ct.		Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check		
City Powell	State OH	Zip Code 43065	M 1	D 0	Y 2	Amount \$100.00	
Full Name of Contributor Rosalinde Childers					Registration Number, if PAC		
Street Address 10048 Lavenham Circle West		Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check		
City Powell	State OH	Zip Code 43065	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor Tonetta M. Brehm					Registration Number, if PAC		
Street Address 81 Garden Rd.		Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43214	M 1	D 0	Y 2	Amount \$350.00	
Full Name of Contributor Daniel E. Bringardner					Registration Number, if PAC		
Street Address 187 S. Broadleigh Rd.		Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor William Morehead Lane					Registration Number, if PAC		
Street Address 175 S. 3rd., Ste. 700		Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check		
City Columbus Distributing Company	State OH	Zip Code 43215	M 1	D 0	Y 2	Amount \$200.00	
Full Name of Contributor Jay B. Eggspuehler					Registration Number, if PAC		
Street Address 7250 Coffman Road		Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 2	Amount \$400.00	
Full Name of Contributor Mark C. Melko					Registration Number, if PAC		
Street Address 297 Crestview Road		Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43202	M 1	D 0	Y 2	Amount \$250.00	

* 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 **\$2,800.00**

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