

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 Donald A. Seager**				Registration Number, if PAC		
Street Address 6890 Foresthaven Loop		Employer/Occupation/Labor Organization* Re/Max Affiliates/IN/Appraiser			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43016	M 1	D 1	Y 2	Amount \$500.00
Full Name of Contributor John M.D.Shady, Esq.				Registration Number, if PAC		
Street Address 132 Northwoods Blvd., St. 100		Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43235	M 1	D 1	Y 2	Amount \$300.00
Full Name of Contributor Blaise Baker, Esq.				Registration Number, if PAC		
Street Address 600 S. High St., Ste. 201		Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 1	D 1	Y 2	Amount \$500.00
Full Name of Contributor Shirley Blake				Registration Number, if PAC		
Street Address 4655 Holton Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 1	D 1	Y 2	Amount \$500.00
Full Name of Contributor Byron Blake				Registration Number, if PAC		
Street Address 4655 Holton Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 1	D 1	Y 2	Amount \$500.00
Full Name of Contributor Kimberly A. Taneff				Registration Number, if PAC		
Street Address 7825 Brandon Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City New Albany	State OH	Zip Code 43054	M 1	D 1	Y 2	Amount \$500.00
Full Name of Contributor Nikolina T. Weaver				Registration Number, if PAC		
Street Address 1811 Roxbury Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43212	M 1	D 1	Y 2	Amount \$500.00
Full Name of Contributor Stephen Destefano, Jr.				Registration Number, if PAC		
Street Address 8107 Laurel Lake Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Liberty Township	State OH	Zip Code 45044	M 1	D 1	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)]

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

Page Total **\$3,800.00**