

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 Paul A. Bodycombe, Esq.							Registration Number, if PAC		
Street Address 3535 Fishinger Blvd., Ste. 220				Employer/Occupation/Labor Organization* self-employed				Form (Cash, Check, etc.) Check	
City Hilliard		State OH		Zip Code 43206		M D Y 1 1 2 7 0 7		Amount \$500.00	
Full Name of Contributor Edward W. Erfurt, III, Esq.							Registration Number, if PAC		
Street Address 3442 Riverside Dr.				Employer/Occupation/Labor Organization* self-employed				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43221		M D Y 1 1 2 7 0 7		Amount \$500.00	
Full Name of Contributor Mark R. Reitz, Esq.							Registration Number, if PAC		
Street Address 546 Fallis Rd.				Employer/Occupation/Labor Organization* Fegter, Brown, Hill & Ritter				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43214		M D Y 1 1 2 7 0 7		Amount \$500.00	
Full Name of Contributor William J. Browning, Esq.							Registration Number, if PAC		
Street Address 670 Northbridge Ct.				Employer/Occupation/Labor Organization* Browning & Meyer, LPA				Form (Cash, Check, etc.) Check	
City Westerville		State OH		Zip Code 43081		M D Y 1 1 2 7 0 7		Amount \$500.00	
Full Name of Contributor Gregory S. Lashutka, Esq.							Registration Number, if PAC		
Street Address 729 Mohawk St.				Employer/Occupation/Labor Organization* Nationwide, Sr. VP Corporate Relations				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43206		M D Y 1 1 2 7 0 7		Amount \$500.00	
Full Name of Contributor Diane Morris							Registration Number, if PAC		
Street Address 5489 Cartwright Ln. E				Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) Check	
City Dublin		State OH		Zip Code 43016		M D Y 1 1 2 7 0 7		Amount \$500.00	
Full Name of Contributor William A. Good, Esq.**							Registration Number, if PAC		
Street Address 4653 Cherryfield P.				Employer/Occupation/Labor Organization* self-employed				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43235		M D Y 1 1 2 7 0 7		Amount \$500.00	
Full Name of Contributor Robert R. Dunn, Esq.							Registration Number, if PAC		
Street Address 1764 Edgemont Rd.				Employer/Occupation/Labor Organization* Bailey Cavalieri, LLC				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43212		M D Y 1 1 2 7 0 7		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 **\$4,000.00**