

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 Tim Gerrity						Registration Number, if PAC			
Street Address 400 S. 5th St., Ste. 302			Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 9	Y 2	Amount \$100.00	
Full Name of Contributor Gary W. Hammond						Registration Number, if PAC			
Street Address 556 E. Town St.			Employer/Occupation/Labor Organization* Attorney				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 9	Y 2	Amount \$150.00	
Full Name of Contributor Tunney Lee King						Registration Number, if PAC			
Street Address 380 S. Fifth St.			Employer/Occupation/Labor Organization* Attorney				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 9	Y 2	Amount \$150.00	
Full Name of Contributor William Logan						Registration Number, if PAC			
Street Address 1200 Le Veque Town, 50 W. Broad			Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 9	Y 2	Amount \$150.00	
Full Name of Contributor W. Locke McKenzie						Registration Number, if PAC			
Street Address 380 S. 5th St.			Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 9	Y 2	Amount \$150.00	
Full Name of Contributor Joseph Murray						Registration Number, if PAC			
Street Address 1533 Lake Shore Dr.			Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43204		M 0	D 9	Y 2	Amount \$150.00	
Full Name of Contributor Frederick Portman						Registration Number, if PAC			
Street Address 471 E. Broad St., Ste. 1820			Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 9	Y 2	Amount \$200.00	
Full Name of Contributor Stan A. Malatesta						Registration Number, if PAC			
Street Address 2742 Marblevista Blvd.			Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43204		M 0	D 9	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)]

Page Total **\$1,550.00**

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