

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 Bruce Soll					Registration Number, if PAC		
Street Address 141 S. Drexel Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor Ginni D. Ragan					Registration Number, if PAC		
Street Address 546 Westbury Woods Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State OH	Zip Code 43081	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor Robert J. Behal					Registration Number, if PAC		
Street Address 501 S. High St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 2	Amount \$200.00	
Full Name of Contributor Artz & Dewhirst, LLP					Registration Number, if PAC		
Street Address 560 E. Town St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 2	Amount \$250.00	
Full Name of Contributor Lane Alton & Horst, LLC					Registration Number, if PAC		
Street Address 175 South Third St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 2	Amount \$600.00	
Full Name of Contributor Franklin County Republican Party					Registration Number, if PAC		
Street Address 14 E. Gay St., 2nd Fl.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 2	Amount \$3,500.00	
Full Name of Contributor Dianne M. Hoover					Registration Number, if PAC		
Street Address 6174 Maxton Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State OH	Zip Code 43085	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor H.C. Bland, III**					Registration Number, if PAC		
Street Address 290 Eastmoor Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 2	Amount \$75.00	

* 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 \$6,125.00

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