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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 Alphonse P. Cincione			Registration Number, if PAC	
Street Address 1126 Ormsby Place	Employer/Occupa	tion/Labor Organization*	- Видостранција с рабора основа о С	Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43212	1 0 1 4 0 8	Amount \$150.00
Full Name of Contributor Dimon R. McFerson	yanayda waxaadaa aa a		Registration Number, if P	AC
Street Address 2524 Deseret Drive	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.) Check
City Powell	State OH	Zip Code 43065	1 0 1 4 0 8	Amount \$50.00
Full Name of Contributor Darlene McFerson			Registration Number, if PAC	
Street Address 2524 Deseret Drive	Employer/Occupa	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Powell	State OH	Zip Code 43065	1 0 1 4 0 8	Amount \$50.00
Full Name of Contributor Leon David Bass Registration Number, if PAC				
Street Address 300 East Broad St., Ste. 300	Employer/Occupa Attorney	ntion/Labor Organization*		Form (Cash, Check, etc.) Check
^{City} Columbus	State OH	Zip Code 43215	1 0 1 4 0 8	Amount \$100.00
Full Name of Contributor Registration Number, if PAC R. Blane Walter				
Street Address 2372 Coventry Rd.	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.) Check
^{City} Columbus	State OH	Zip Code 43221	1 0 1 4 0 8	,
Full Name of Contributor Gerard S. Kakos, M.D. Registration Number, if I				
Street Address 4830 Oldbridge Dr.	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.) Check
^{City} Columbus	State OH	Zip Code 43220	1 0 1 4 0 8	
Full Name of Contributor Sharon A. Graver Registration Number, if I				
Street Address 1190 Kenbrook Hills Drive	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
^{City} Columbus	State OH	Zip Code 43220	1 0 1 4 0 8	
Full Name of Contributor James M. Wiles, II Registration Number, if P.				
Street Address 2156 Arrlington Ave.		ation/Labor Organization*		Form (Cash, Check, etc.) Check
^{City} Columbus	State OH	Zip Code 43221	1 0 1 4 0 8	Amount \$100.00

Page Total \$800.00

^{*} 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)]