

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 Jay E. Michael, Esq. **							Registration Number, if PAC			
Street Address 729 S. Front St.			Employer/Occupation/Labor Organization* self-employed				Form (Cash, Check, etc.) Check			
City Columbus			State OH		Zip Code 43206		M 1	D 1	Y 2 8 0 7	Amount \$500.00
Full Name of Contributor John W. Royer**							Registration Number, if PAC			
Street Address 1480 Dublin Rd.			Employer/Occupation/Labor Organization* Kohr Royer Griffith, Inc./Appraiser				Form (Cash, Check, etc.) Check			
City Columbus			State OH		Zip Code 43215		M 1	D 1	Y 2 8 0 7	Amount \$500.00
Full Name of Contributor William A. Werth							Registration Number, if PAC			
Street Address 5664 Keating Dr.			Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) Check			
City Dublin			State OH		Zip Code 43016		M 1	D 1	Y 2 8 0 7	Amount \$250.00
Full Name of Contributor Susan S. Wasserman, Esq. **							Registration Number, if PAC			
Street Address 5350 W. Main St.			Employer/Occupation/Labor Organization* self-employed				Form (Cash, Check, etc.) Check			
City Columbus			State OH		Zip Code 43213		M 1	D 1	Y 2 8 0 7	Amount \$300.00
Full Name of Contributor Kathleen A. Ballenger, Esq.							Registration Number, if PAC			
Street Address 5839 Clark State Rd.			Employer/Occupation/Labor Organization* Kessler & Ballenger Co., LPA				Form (Cash, Check, etc.) Check			
City Gahanna			State OH		Zip Code 43230		M 1	D 1	Y 2 9 0 7	Amount \$500.00
Full Name of Contributor Phillip G. Lilly, Esq.							Registration Number, if PAC			
Street Address 510 Stream Isle Dr.			Employer/Occupation/Labor Organization* Becker & Lilly, LLC				Form (Cash, Check, etc.) Check			
City Powell			State OH		Zip Code 43065		M 1	D 1	Y 2 9 0 7	Amount \$250.00
Full Name of Contributor Keith W. Schneider, Esq.							Registration Number, if PAC			
Street Address 250 Civic Center Drive, Ste. 500			Employer/Occupation/Labor Organization* Maguire and Schneider, LLP				Form (Cash, Check, etc.) Check			
City Columbus			State OH		Zip Code 43215		M 1	D 1	Y 2 9 0 7	Amount \$300.00
Full Name of Contributor James J. Marlin, Jr., Esq.							Registration Number, if PAC			
Street Address 2808 Lymington Rd.			Employer/Occupation/Labor Organization* self-employed				Form (Cash, Check, etc.) Check			
City Columbus			State OH		Zip Code 43220		M 1	D 1	Y 2 9 0 7	Amount \$100.00

* 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 **\$2,700.00**