

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 J. Christopher Ralston, Esq.						Registration Number, if PAC	
Street Address 209 E. State St.			Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215	M 1	D 1	Y 1	Amount \$500.00
Full Name of Contributor Narcus J. Tsiliacos, Esq.						Registration Number, if PAC	
Street Address 647 Park Meadow Rd., Ste. I			Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Westerville		State OH	Zip Code 43081	M 1	D 1	Y 1	Amount \$400.00
Full Name of Contributor Patricia A. Bailey						Registration Number, if PAC	
Street Address 3057 Catan Loop			Employer/Occupation/Labor Organization* Palmer Miller Nelson Insurance			Form (Cash, Check, etc.) Check	
City Grove City		State OH	Zip Code 43123	M 1	D 1	Y 1	Amount \$300.00
Full Name of Contributor David L. Humphrey, Esq.						Registration Number, if PAC	
Street Address 8070 Kingsley Dr.			Employer/Occupation/Labor Organization* Zaino & Humphrey			Form (Cash, Check, etc.) Check	
City Reynoldsburg		State OH	Zip Code 43068	M 1	D 1	Y 1	Amount \$300.00
Full Name of Contributor Steven A. Miller						Registration Number, if PAC	
Street Address 6444 Darling Road			Employer/Occupation/Labor Organization* Palmer Miller Nelson Insurance			Form (Cash, Check, etc.) Check	
City Blacklick		State OH	Zip Code 43004	M 1	D 1	Y 1	Amount \$300.00
Full Name of Contributor Gerald Robins**						Registration Number, if PAC	
Street Address 2715 E. Main St.			Employer/Occupation/Labor Organization* self-employed appraiser			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43209	M 1	D 1	Y 1	Amount \$500.00
Full Name of Contributor Alan S. Acker, Esq.						Registration Number, if PAC	
Street Address 145 E. Rich St., 4th Fl.			Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215	M 1	D 1	Y 1	Amount \$500.00
Full Name of Contributor Michael J. Anthony, Esq.						Registration Number, if PAC	
Street Address 383 N. Front St., Ste. LL			Employer/Occupation/Labor Organization* self-employed			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215	M 1	D 1	Y 1	Amount \$300.00

* 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 **\$3,100.00**