

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 Paul Daniel Ritter, Jr.						Registration Number, if PAC			
Street Address 65 E. State St.			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 5	Y 0	Y 7	Amount \$250.00
Full Name of Contributor Robert E. Lindemann						Registration Number, if PAC			
Street Address 4577 Hightop Drive			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Westerville		State OH	Zip Code 43081		M 0	D 5	Y 0	Y 7	Amount \$100.00
Full Name of Contributor Isaac, Brant Ledman & Teetor, LLP						Registration Number, if PAC			
Street Address 250 East Broad St.			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 5	Y 0	Y 7	Amount \$500.00
Full Name of Contributor Richard C. Visintine						Registration Number, if PAC			
Street Address 3715 Surrey Hill Place			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43220		M 0	D 5	Y 0	Y 9	Amount \$500.00
Full Name of Contributor Kurt Schlemitz						Registration Number, if PAC			
Street Address 5502 Heatherwood Court			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Dublin		State OH	Zip Code 43017		M 0	D 5	Y 0	Y 9	Amount \$200.00
Full Name of Contributor Julie M. Barnett						Registration Number, if PAC			
Street Address 5087 Oakmont Place			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Westerville		State OH	Zip Code 43082		M 0	D 5	Y 0	Y 9	Amount \$300.00
Full Name of Contributor Robert B. Barnett, Jr.						Registration Number, if PAC			
Street Address 5087 Oakmont Place			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Westerville		State OH	Zip Code 43082		M 0	D 5	Y 0	Y 9	Amount \$300.00
Full Name of Contributor Catherine Adams						Registration Number, if PAC			
Street Address 729 Mohawk St.			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43206		M 0	D 5	Y 0	Y 9	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 **\$2,650.00**

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