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## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full Judge Lawrence A. Belskis Comm	ittee			
Full Name of Contributor			Registration Number, if PAC	
Brian D. Hall				
Street Address 1937 Colilngswood Rd.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
<sup>City</sup> Columbus	State OH	Zip Code 43221	1 0 1 4 0 8	Amount \$100.00
Full Name of Contributor  Timothy C. Hall, Jr.				
Street Address 2267 Tremont Rd.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	1 0 1 4 0 8	Amount \$100.00
Full Name of Contributor Robert Gray Palmer				AC
Street Address 185 Rustic PI.	Employer/Occu	pation/Labor Organization*	The control of the first of the control of the cont	Form (Cash, Check, etc.) Check
<sup>City</sup> Columbus	State OH	Zip Code 43214	1 0 1 4 0 8	Amount \$250.00
Full Name of Contributor  Nein Law Office  Registration Number, if PAC				
Street Address 2291 Scioto Harber Dr.	Employer/Occu	pation/Labor Organization*	Organization that the statement are composed and a statement of the statem	Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43204	1 0 1 4 0 8	Amount \$250.00
Full Name of Contributor  Alison L. Wooldridge				
Street Address 2329 Tucker Trail	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
<sup>City</sup> Lewis Center	State OH	Zip Code 43035	1 0 1 5 0 8	Amount \$500.00
Full Name of Contributor  Heather H. Appel  Registration Number, if PAC				
Street Address 787 Tweed Court	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	1 0 1 5 0 8	Amount \$200.00
Full Name of Contributor  Zeiger, Tigges & Little, LLP  Registration Number,				AC
Street Address 41 South High St., Ste. 3500	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	1 0 1 5 0 8	Amount \$500.00
Full Name of Contributor  Michael P. Cleary  Registration Number, if PAC				
Street Address 2740 East main St.	Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check
<sup>City</sup> Bexley	State OH	Zip Code 43209	M D Y 1 5 0 8	Amount \$500.00

Page Total \$2,400.00

<sup>\*</sup> 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)]