

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 Alice Larrimer						Registration Number, if PAC			
Street Address 2030 Aladdin Woods Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43212		M 0	D 9	Y 3	Amount \$500.00	
Full Name of Contributor Michael D. Juhola						Registration Number, if PAC			
Street Address 867 High St., Ste. B			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Worthington		State OH	Zip Code 43085		M 0	D 9	Y 3	Amount \$200.00	
Full Name of Contributor Larry L. Lanham, II						Registration Number, if PAC			
Street Address 2045 Big Tree Dr.			Employer/Occupation/Labor Organization* Attorney				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43223		M 0	D 9	Y 3	Amount \$50.00	
Full Name of Contributor Richard R. Stedman						Registration Number, if PAC			
Street Address 2665 Lane Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43220		M 0	D 9	Y 3	Amount \$200.00	
Full Name of Contributor Michael L. Kohr						Registration Number, if PAC			
Street Address 1480 Dublin Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 9	Y 3	Amount \$250.00	
Full Name of Contributor Margaret W. Walter						Registration Number, if PAC			
Street Address 330 W. Spring St., Ste. 400			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 9	Y 3	Amount \$500.00	
Full Name of Contributor Thompson Hine Good Government Pogram						Registration Number, if PAC OH428			
Street Address 3900 Key Center, 137 Public Sq.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Cleveland		State OH	Zip Code 44114		M 1	D 0	Y 0	Amount \$500.00	
Full Name of Contributor Wayne A. Jenkins						Registration Number, if PAC			
Street Address 318 Whetstone Dr. W.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Powell		State OH	Zip Code 43065		M 1	D 0	Y 0	Amount \$150.00	

* 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 **\$2,350.00**

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