

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Jim Mason						
Full Name of Contributor John J. Haidet				Registration Number, if PAC		
Street Address 3750 Alward Rd., SW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Pataskala	State OH	Zip Code 43062	M 1	D 0	Y 1 9 0 6	Amount \$75.00
Full Name of Contributor John R. Kean				Registration Number, if PAC		
Street Address 20 S. Drexel Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 1 9 0 6	Amount \$500.00
Full Name of Contributor K.R. Goldberg				Registration Number, if PAC		
Street Address 7503 Heatherwood Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 1 9 0 6	Amount \$100.00
Full Name of Contributor Erik W. Hrabowy				Registration Number, if PAC		
Street Address 663 Laurel Ridge Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 1 9 0 6	Amount \$40.00
Full Name of Contributor Douglas R. Anderson				Registration Number, if PAC		
Street Address 4440 Dublin Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 1	D 0	Y 1 9 0 6	Amount \$50.00
Full Name of Contributor Thomas N. Ryan				Registration Number, if PAC		
Street Address 265 Stanberry Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 1 9 0 6	Amount \$100.00
Full Name of Contributor Ronald B. Carmen				Registration Number, if PAC		
Street Address 318 S. Columbia Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 1 9 0 6	Amount \$100.00
Full Name of Contributor Robert H. Jeffrey				Registration Number, if PAC		
Street Address 296 Ashbourne Pl.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 1 9 0 6	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)]

Page Total **\$1,065.00**