

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Committee for Jim Mason</b>							
Full Name of Contributor <b>Kim Halliburton-Cohen</b>					Registration Number, if PAC		
Street Address <b>1776 W. Lane Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	M <b>1</b>	D <b>1</b>	Y <b>1</b>	Amount <b>\$50.00</b>	
Full Name of Contributor <b>White for Judge Committee</b>					Registration Number, if PAC		
Street Address <b>PO Box 20402</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43220</b>	M <b>1</b>	D <b>2</b>	Y <b>0</b>	Amount <b>\$102.00</b>	
Full Name of Contributor <b>James W. Mason</b>					Registration Number, if PAC		
Street Address <b>125 Autumn Rush Court</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>\$19,500.00</b>	
Full Name of Contributor <b>Franklin County Republican Party-Judicial Account</b>					Registration Number, if PAC		
Street Address <b>14 E. Gay St., 2nd Floor</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>\$5,000.00</b>	
Full Name of Contributor <b>Ramona Whister</b>					Registration Number, if PAC		
Street Address <b>2570 Berwick</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>150.00</b>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	

\* 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 \$24,802.00