## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Jim Mason					
Full Name of Contributor Barbara W. Hoyer			Registration Number, if I	PAC	
Street Address 2569 Brentwood Rd.	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	1 0 3 1 0 6	Amount \$100.00	
Full Name of Contributor Mindy Dugan			Registration Number, if F	PAC	
Street Address 500 South Fourth St.	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	1 1 0 1 0 6		
Full Name of Contributor Vincent Dugan			Registration Number, if F	PAC	
Street Address 500 South Fourth St.		upation/Labor Organization •		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	1 1 0 1 0 6		
Full Name of Contributor Chester, Wilcox & Saxbe PAC				PAC	
Street Address 65 East State St.	Employer/Occur	upation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	1 1 0 2 0 6	Amount \$1,000.00	
Full Name of Contributor Meeks Shamansky PAC			Registration Number, if P Local PAC	Registration Number, if PAC Local PAC	
Street Address 511 S. High St	Employer/Occur	upation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	1 1 0 2 0 6	Amount \$1,000.00	
Full Name of Contributor  Eugene B. Lewis			Registration Number, if P	Registration Number, if PAC	
Street Address 206 S. Parkview Ave	Employer/Occur	ipation/Labor Organization*	<b></b>	Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	1 1 0 2 0 6	Amount \$500.00	
Full Name of Contributor Margaret H. Lewis			Registration Number, if P.	Registration Number, if PAC	
Street Address 206 S. Parkview Ave		pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbusn	State OH	Zip Code 43209	M D Y 1 1 0 2 0 6	Amount \$500.00	
Full Name of Contributor Heinz E. Ickert			Registration Number, if P.		
Street Address 280 N. High St., Suite 800	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M D Y 1 1 0 2 0 6	Amount \$200.00	

Page Total \$4,300.00

<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)]