

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Jim Mason							
Full Name of Contributor Richard P. Oestreich					Registration Number, if PAC		
Street Address 80 E. 5th St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Chillecothe	State OH	Zip Code 45601	M 1	D 0	Y 1 1 0 6	Amount \$100.00	
Full Name of Contributor Wagbros Company (An LLC - Michael J. Wagenbrenner)					Registration Number, if PAC		
Street Address 1289 Grandview Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43212	M 1	D 0	Y 1 1 0 6	Amount \$500.00	
Full Name of Contributor Christopher T. Cicero					Registration Number, if PAC		
Street Address 1308 W. Mound St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43223	M 1	D 0	Y 1 1 0 6	Amount \$100.00	
Full Name of Contributor Seth T. Reichenbach **					Registration Number, if PAC		
Street Address 35 E. Livingston Avenue		Employer/Occupation/Labor Organization* Self-employed Attorney			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 1 1 0 6	Amount \$50.00	
Full Name of Contributor Kay Anne Helman					Registration Number, if PAC		
Street Address 63 South Cassady Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 1 2 0 6	Amount \$125.00	
Full Name of Contributor Lindsay A. Helman					Registration Number, if PAC		
Street Address 924 S. Cassingham Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 1	D 0	Y 1 2 0 6	Amount \$125.00	
Full Name of Contributor Lawrence E. Helman					Registration Number, if PAC		
Street Address 63 South Cassady Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 1 2 0 6	Amount \$125.00	
Full Name of Contributor David L. Hodge					Registration Number, if PAC		
Street Address 924 S. Cassingham Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 1	D 0	Y 1 2 0 6	Amount \$125.00	

* 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 \$1,250.00