

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Jim Mason							
Full Name of Contributor Bruce S. Growick					Registration Number, if PAC		
Street Address 934 Middlebury Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State OH	Zip Code 43085	M 1	D 0	Y 1 0 0 6	Amount \$150.00	
Full Name of Contributor Rhett Plank					Registration Number, if PAC		
Street Address 7600 Slate Ridge Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 1 0 0 6	Amount \$250.00	
Full Name of Contributor Darrell E. Fawley, Jr.					Registration Number, if PAC		
Street Address 520 East Rich St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 1 0 0 6	Amount \$50.00	
Full Name of Contributor Grossman Law Offices Co. LPA (Jeffrey Grossman)					Registration Number, if PAC		
Street Address 32 West Hoster St.		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 0 0 6	Amount \$3,000.00	
Full Name of Contributor Valuation Analysts, LLC (Brian A. Russell)					Registration Number, if PAC		
Street Address 2545 Farmers Drive, Suite 370		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43235	M 1	D 0	Y 1 0 0 6	Amount \$100.00	
Full Name of Contributor William M. Ditty					Registration Number, if PAC		
Street Address 3010 Hayden Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43235	M 1	D 0	Y 1 0 0 6	Amount \$100.00	
Full Name of Contributor Jeffrey L. Smalldon **					Registration Number, if PAC		
Street Address 6048 Rocky Rill Rd.		Employer/Occupation/Labor Organization* Self-employed Psychologist			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43235	M 1	D 0	Y 1 0 0 6	Amount \$100.00	
Full Name of Contributor Kemp, Schaeffer, Rowe & Lardiere Co. LPA (Harold Kemp)					Registration Number, if PAC		
Street Address 88 West Mound St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 1 0 0 6	Amount \$3,000.00	

* 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)]