

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

FILED

07 DEC 14 PM 2:42

Full Name of Committee <b>Mas for Judge Committee</b>		Registration Number, if PAC <b>FRANKLIN COUNTY BOARD OF ELECTIONS</b>	
Full Name of Candidate <b>Joseph L. Mas</b>			
Street Address <b>439 Colonial Ave.</b>		Office Sought <b>Municipal Court Judge</b>	District <b>Franklin Co.</b>
City <b>Worthington</b>		State <b>OH</b>	Zip Code <b>43085</b>
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Pre-General
	<input checked="" type="checkbox"/> Post-General	<input type="checkbox"/> Annual Year	<input type="checkbox"/> Termination
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly
	<input type="checkbox"/> Semiannual		
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date of Election	1 <sup>M</sup> 1 0 <sup>D</sup> 6 0 <sup>Y</sup> 7

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box  No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	21813	64
2. Total monetary contributions (From Form No. 31-A)	\$	4525	00
3. Total other income (From Form No. 31-A-2)	\$	771	03
4. Total funds available (sum of lines 1, 2, 3)	\$	27109	67
5. Total monetary expenditures (From Form No. 31-B)	\$	25862	76
6. Balance on hand (line 4 minus line 5)	\$	1246	91
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	400	00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	-	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	2000	00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	-	
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	-	
12. Value of independent expenditures made (From Form No. 31-U)	\$	-	
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$	-	

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

Linda Mercadante, Treasurer  
Print Name and Title (Treasurer and Deputy Treasurer only)

*Linda Mercadante*  
Signature

12/14/07  
00/00/0000  
Date

Contribution pages 4

Expenditure pages 2

Other pages 19

Total pages 25

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>MAS FOR JUDGE COMMITTEE</b>							
Full Name of Contributor <b>MICHAEL HUNTER</b>						Registration Number, if PAC	
Street Address <b>3360 TREMONT RD.</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>10</b>	D <b>12</b>	Y <b>07</b>	Amount <b>35.00</b>	
Full Name of Contributor <b>BERNARD Z. YAVITCH</b>						Registration Number, if PAC	
Street Address <b>592 S. THIRO ST.</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>10</b>	D <b>17</b>	Y <b>07</b>	Amount <b>90.00</b>	
Full Name of Contributor <b>SHAUTTENSTEIN ZOR &amp; DUNN</b>						Registration Number, if PAC <b>OH 1310</b>	
Street Address <b>250 WEST ST.</b>			Employer/Occupation/Labor Organization* <b>STATE &amp; LOCAL PAC</b>			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43215</b>	M <b>10</b>	D <b>18</b>	Y <b>07</b>	Amount <b>500.00</b>	
Full Name of Contributor <b>LOIS E. MARTINEZ</b>						Registration Number, if PAC	
Street Address <b>P.O. Box 550</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>ST. HELENA ISLAND</b>	State <b>OH S.C.</b>	Zip Code <b>29920</b>	M <b>10</b>	D <b>19</b>	Y <b>07</b>	Amount <b>75.00</b>	
Full Name of Contributor <b>MICHAEL SHAWN DINGUS</b>						Registration Number, if PAC	
Street Address <b>213 POWHATTAN AVE.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43204</b>	M <b>10</b>	D <b>19</b>	Y <b>07</b>	Amount <b>200.00</b>	
Full Name of Contributor <b>HOWARD LOWE</b>						Registration Number, if PAC	
Street Address <b>6835 AVERDON CT.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>REYNOLDSBURG</b>	State <b>OH</b>	Zip Code <b>43068</b>	M <b>10</b>	D <b>22</b>	Y <b>07</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>GUADALUPE VELASQUEZ</b>						Registration Number, if PAC	
Street Address <b>1740 CANVASBACK LN</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>10</b>	D <b>25</b>	Y <b>07</b>	Amount <b>75.00</b>	
Full Name of Contributor <b>E. DENNIS MUCHNICK</b>						Registration Number, if PAC	
Street Address <b>270 CLOVER CT.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>DUBLIN</b>	State <b>OH</b>	Zip Code <b>43017</b>	M	D	Y	Amount <b>400.00</b>	

\* 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)]

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>MAS FOR JUDGE COMMITTEE</b>							Registration Number, if PAC	
Full Name of Contributor <b>DEAN HERNANDEZ</b>							Form (Cash, Check, etc.) <b>CHECK</b>	
Street Address <b>605 TANSY LN.</b>			Employer/Occupation/Labor Organization*		M   D   Y <b>10   24   07</b>		Amount <b>500.00</b>	
City <b>WESTERVILLE</b>	State <b>OH</b>	Zip Code <b>43081</b>						
Full Name of Contributor <b>KELLY LUCAS</b>							Form (Cash, Check, etc.) <b>CHECK</b>	
Street Address <b>500 S. FRONT ST.</b>			Employer/Occupation/Labor Organization*		M   D   Y <b>10   26   07</b>		Amount <b>100.00</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43215</b>						
Full Name of Contributor <b>GABRIELLE WONNELL</b>							Form (Cash, Check, etc.) <b>CHECK</b>	
Street Address <b>3171 MINERVA LK RD</b>			Employer/Occupation/Labor Organization*		M   D   Y <b>10   12   07</b>		Amount <b>50.00</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43231</b>						
Full Name of Contributor <b>JOYCE HOSTETLER</b>							Form (Cash, Check, etc.) <b>CHECK</b>	
Street Address <b>193 E. FRANCES AVE.</b>			Employer/Occupation/Labor Organization*		M   D   Y <b>11   01   07</b>		Amount <b>100.00</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43201</b>						
Full Name of Contributor <b>LABORERS INT. UNION N.A.M LOCAL 423</b>							Registration Number, if PAC <b>LA 912</b>	
Street Address <b>670 AWM CREEK DR.</b>			Employer/Occupation/Labor Organization*		M   D   Y <b>10   22   07</b>		Amount <b>1000.00</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43205</b>						
Full Name of Contributor <b>ANN HOKE</b>							Form (Cash, Check, etc.) <b>CHECK</b>	
Street Address <b>172 MAYFAIR BLVD.</b>			Employer/Occupation/Labor Organization*		M   D   Y <b>10   25   07</b>		Amount <b>35.00</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43213</b>						
Full Name of Contributor <b>DAN E. BELVILLE</b>							Form (Cash, Check, etc.) <b>CHECK</b>	
Street Address <b>1184 SMALLWOOD DR.</b>			Employer/Occupation/Labor Organization*		M   D   Y <b>10   25   07</b>		Amount <b>35.00</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43235</b>						
Full Name of Contributor <b>LAURA ADKINS BUGHES</b>							Form (Cash, Check, etc.) <b>CHECK</b>	
Street Address <b>2282 WOODSTOCK RD.</b>			Employer/Occupation/Labor Organization*		M   D   Y <b>10   31   07</b>		Amount <b>50.00</b>	
City <b>UPPER ARLINGTON</b>	State <b>OH</b>	Zip Code <b>43221</b>						

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# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>MAS FOR JUDGE COMMITTEE</b>		Registration Number, if PAC	
Full Name of Contributor <b>GWYN STETLER</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
Street Address <b>6381 HARRIOTT RD.</b>	Employer/Occupation/Labor Organization*	Amount	
City <b>POWEL</b>	State <b>OH</b>	Zip Code <b>43065</b>	<b>103007 50.00</b>
Full Name of Contributor <b>PRISCILA KRAMER</b>		Registration Number, if PAC	
Street Address <b>991 BRENFORD DR.</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43220</b>	<b>102707 30.00</b>
Full Name of Contributor <b>TOKI CLARK</b>		Registration Number, if PAC	
Street Address <b>233 S. HIGH ST. 3RD FL</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43215</b>	<b>102907 700.00</b>
Full Name of Contributor <b>N. LEE THOMPSON</b>		Registration Number, if PAC	
Street Address <b>85 E. GAY ST. SUITE 810</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43215</b>	<b>110107 100.00</b>
Full Name of Contributor <b>J. ANTHONY LOGAN</b>		Registration Number, if PAC	
Street Address <b>4740 HAMDEN RUN RD</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43221</b>	<b>110407 100.00</b>
Full Name of Contributor <b>GLORIA SCHAMELY</b>		Registration Number, if PAC	
Street Address <b>P.O. Box 26601</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43226</b>	<b>110207 50.00</b>
Full Name of Contributor <b>SUSAN ORTMAN GOERING</b>		Registration Number, if PAC	
Street Address <b>1339 ASHLAND AVE.</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43212</b>	<b>110607 100.00</b>
Full Name of Contributor <b>BRICKER + ECKLER STATE PAC</b>		Registration Number, if PAC <b>OH 821</b>	
Street Address <b>100 S. THIRD ST.</b>		Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43215</b>	<b>110507 500.00</b>

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# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>MAS FOR JUDGE COMMITTEE</b>									
Full Name of Contributor <b>PAULA DEMING</b>						Registration Number, if PAC			
Street Address <b>6775 ALLOWAY S.W.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>WORTHINGTON</b>		State <b>OH</b>	Zip Code <b>43085</b>		M	D	Y	Amount <b>50.00</b>	
Full Name of Contributor <b>M. ELIZABETH GIL</b>						Registration Number, if PAC			
Street Address <b>90 E. MITHOFF</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43206</b>		M	D	Y	Amount <b>50.00</b>	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State	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	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	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	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	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	Zip Code		M	D	Y	Amount	

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# Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full			Registration Number, if PAC			
Full Name	Type*	Zip Code	M	D	Y	Amount
MAS FOR JUDGE COMMITTEE						
INTEGRITY COMMUNICATION SERVICES	RE		11	01	07	659.98
3333 EVERSON RD. W.	OH	43232	CHECK			
COLUMBUS			Registration Number, if PAC			
U.S. BANK - REVERSED CHECK						
U.S. BANK - REVERSED CHECK	RE		08	13	07	61.05
688 N. HIGH ST.	OH	43085	EVEC. TR.			
WORTHINGTON			Registration Number, if PAC			
U.S. BANK - PRINT COLLECTION CREDIT						
U.S. BANK - PRINT COLLECTION CREDIT	RE		09	14	07	50.00
688 HIGH ST.	OH	43085	EVEC. TR.			
WORTHINGTON			Registration Number, if PAC			
	RE					
	OH		Form (Cash, Check, etc.)			
			Registration Number, if PAC			
	RE					
	OH		Form (Cash, Check, etc.)			
			Registration Number, if PAC			
	RE					
	OH		Form (Cash, Check, etc.)			
			Registration Number, if PAC			
	RE					
	OH		Form (Cash, Check, etc.)			
			Registration Number, if PAC			
	RE					
	OH		Form (Cash, Check, etc.)			
			Registration Number, if PAC			
	RE					
	OH		Form (Cash, Check, etc.)			
			Registration Number, if PAC			

\* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full				M	D	Y	Amount
MAS FOR JUDGE COMMITTEE				10	30	07	500 <sup>00</sup>
To Whom Paid							
PAT PERRY							
Address		Purpose					
7511 SAGEWOOD CT.		AUTOMATED CALLS					
City	State	Zip Code	Check Number				
COLUMBUS	OH	43235	108				
To Whom Paid				M	D	Y	Amount
INTEGRITY COMMUNICATION				10	30	07	7203 <sup>33</sup>
Address							
3333 EVERSON RD. W. CAMPAIGN LITERATURE MAILING							
City	State	Zip Code	Check Number				
COLUMBUS	OH	43232	107				
To Whom Paid				M	D	Y	Amount
RADIOAD INC.				11	06	07	180 <sup>00</sup>
Address							
DEPT L-1739 RADIO ADVERTISING							
City	State	Zip Code	Check Number				
COLUMBUS	OH	43260	VISA				
To Whom Paid				M	D	Y	Amount
WHOK FM / WILKS BROADCASTING				11	03	07	650 <sup>00</sup>
Address							
14528 COLLECTIONS GR.							
City	State	Zip Code	Check Number				
CHICAGO	OH IL	60693	VISA				
To Whom Paid				M	D	Y	Amount
CAPITOL PROMOTION				10	15	07	1942 <sup>00</sup>
Address							
P.O. BOX 231 YARD SIGNS							
City	State	Zip Code	Check Number				
GUENSIDE	OH PA		VISA				
To Whom Paid				M	D	Y	Amount
SHARON SQUARE LIONS				10	22	07	74 <sup>25</sup>
Address							
5590 N. HIGH ST. REFRESHMENTS							
City	State	Zip Code	Check Number				
WORTHINGTON	OH	43085	VISA				
To Whom Paid				M	D	Y	Amount
HOT CARDS				10	26	07	275 <sup>00</sup>
Address							
150 E. MAIN ST. CAMPAIGN LITERATURE							
City	State	Zip Code	Check Number				
COLUMBUS	OH	43215	VISA				
To Whom Paid				M	D	Y	Amount
HOT CARDS				10	29	07	1640 <sup>00</sup>
Address							
150 E. MAIN ST. CAMPAIGN LITERATURE							
City	State	Zip Code	Check Number				
COLUMBUS	OH	43215	VISA				

\$1246458  
Page Total \$0.00

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full									
To Whom Paid						M	D	Y	Amount
MAS FOR JUDGE COMMITTEE						10	29	07	1000 <sup>00</sup>
Address		Purpose							
350 E. FIRST AVE.		RADIO ADVERTISEMENT							
City	State	Zip Code	Check Number						
COLUMBUS	OH	43201	VISA						
To Whom Paid						M	D	Y	Amount
FRANKLIN COMMUNICATION						10	30	07	1011 <sup>50</sup>
Address		Purpose							
4401 CARRIAGE HILL LN		RADIO ADVERTISEMENT							
City	State	Zip Code	Check Number						
COLUMBUS	OH	43220	106						
To Whom Paid						M	D	Y	Amount
FRANKLIN C. DEMOCRATIC PARTY						11	06	07	116 <sup>66</sup>
Address		Purpose							
271 E. STATE ST.		ELECTION DAY FACILITIES RENTAL							
City	State	Zip Code	Check Number						
COLUMBUS	OH	43215	-						
To Whom Paid						M	D	Y	Amount
GRAPHIC T'S						12	12	07	190 <sup>02</sup>
Address		Purpose							
532 MAIN ST.		YARD SIGNS							
City	State	Zip Code	Check Number						
GROVEPORT	OH	43125	-						
To Whom Paid						M	D	Y	Amount
JOSEPH L. MAS						11	11	07	5000 <sup>00</sup>
Address		Purpose							
439 COLONIAL AVE.		REPAYMENT OF LOAN							
City	State	Zip Code	Check Number						
WORTHINGTON	OH	43085	109						
To Whom Paid						M	D	Y	Amount
JOSEPH L. MAS						12	12	07	6000 <sup>00</sup>
Address		Purpose							
439 COLONIAL AVE.		REPAYMENT OF LOAN							
City	State	Zip Code	Check Number						
WORTHINGTON	OH	43085	-						
To Whom Paid						M	D	Y	Amount
U.S. BANK - PROF CORRECTION DEBIT						08	13	07	80 <sup>00</sup>
Address		Purpose							
688 HIGH ST.		BALANCING DEBIT							
City	State	Zip Code	Check Number						
WORTHINGTON	OH	43085	EVEG. TR.						
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City	State	Zip Code	Check Number						
	OH								

13,398.18  
Page Total ~~\$0.00~~