

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Committee for Joseph W. Tests</u>							
Full Name of Contributor <u>Ginni Rasan</u>				Registration Number, if PAC			
Street Address <u>546 Westbury Woods</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43081</u>	<u>1</u>	<u>2</u>	<u>0</u>	<u>2,500.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Rhett Ricart</u>				Registration Number, if PAC			
Street Address <u>P.O. Box 27130</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43227</u>	<u>1</u>	<u>2</u>	<u>1</u>	<u>250.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Ron Hunter</u>				Registration Number, if PAC			
Street Address <u>7825 Holsten Ct.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Dublin</u>		State <u>OH</u>	Zip Code <u>43016</u>	<u>1</u>	<u>2</u>	<u>1</u>	<u>50.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Shelby Jones</u>				Registration Number, if PAC			
Street Address <u>138 E.N. Broadway</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43214</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>200.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Marianne Collins</u>				Registration Number, if PAC			
Street Address <u>423 Hickory Ln.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43081</u>	<u>0</u>	<u>1</u>	<u>1</u>	<u>250.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Buckeye Steel Castings PAC</u>				Registration Number, if PAC <u>C00349449</u>			
Street Address <u>2211 Parsons Ave.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43207</u>	<u>0</u>	<u>1</u>	<u>1</u>	<u>1,000.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Walter E. Dennis</u>				Registration Number, if PAC			
Street Address <u>1797 Scoto Point Dr.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43221</u>	<u>0</u>	<u>1</u>	<u>1</u>	<u>2,500.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			

\* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$ 6,750.00