

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Committee for Joseph W. Testa</u>							
Full Name of Contributor <u>Mary Warden</u>							
Street Address <u>1680 Thrailkill Rd.</u>				M <u>0</u>	D <u>7</u>	Y <u>23</u>	Amount <u>25.00</u>
City <u>Grace City</u>	State <u>OH</u>	Zip Code <u>43123</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Susan Sharp</u>							
Street Address <u>77 Millstone Circle</u>				M <u>0</u>	D <u>7</u>	Y <u>23</u>	Amount <u>50.00</u>
City <u>Pataskala</u>	State <u>OH</u>	Zip Code <u>43062</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Gene Hinterschied</u>							
Street Address <u>5856 Thorngate Dr.</u>				M <u>0</u>	D <u>7</u>	Y <u>23</u>	Amount <u>25.00</u>
City <u>Gallaway</u>	State <u>OH</u>	Zip Code <u>43119</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Vicky Anthony</u>							
Street Address <u>2591 Bryton Dr.</u>				M <u>0</u>	D <u>7</u>	Y <u>23</u>	Amount <u>40.00</u>
City <u>Powell</u>	State <u>OH</u>	Zip Code <u>43065</u>		Form (Cash, Check, etc.) <u>Cash</u>			
Full Name of Contributor <u>Stephanie Philpit</u>							
Street Address <u>1410 Lockbourne Eastern</u>				M <u>0</u>	D <u>7</u>	Y <u>23</u>	Amount <u>25.00</u>
City <u>Ashville</u>	State <u>OH</u>	Zip Code <u>43103</u>		Form (Cash, Check, etc.) <u>Cash</u>			
Full Name of Contributor <u>Tim Clipner</u>							
Street Address <u>6438 Logan Rd.</u>				M <u>0</u>	D <u>7</u>	Y <u>23</u>	Amount <u>50.00</u>
City <u>Powell</u>	State <u>OH</u>	Zip Code <u>43065</u>		Form (Cash, Check, etc.) <u>Cash</u>			

The above are employees of a unit or department under the direct supervision and control of Joseph W. Testa, who currently holds the public office

of County Auditor. I hereby affirm that each contribution was voluntarily made.

[Signature] (Signature of Treasurer or Deputy Treasurer)

Transfer total employee contributions to Form No. 31-A or 31-E, if received at a social or fundraising event. Under "Full Name of Contributor" state "Total employee contributions from form No. 31-G."