

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>Ross Chambers</u>							
Street Address <u>12364 Thoroughbred Dr.</u>				M <u>0</u>	D <u>8</u>	Y <u>1208</u>	Amount <u>150.00</u>
City <u>Pickerington</u>	State <u>OH</u>	Zip Code <u>43147</u>	Form (Cash, Check, etc.) <u>Check</u>				
Full Name of Contributor <u>Chuck Coleman</u>							
Street Address <u>3263 Benbrook Pond Dr.</u>				M <u>0</u>	D <u>8</u>	Y <u>1208</u>	Amount <u>20.00</u>
City <u>Hilliard</u>	State <u>OH</u>	Zip Code <u>43026</u>	Form (Cash, Check, etc.) <u>Check</u>				
Full Name of Contributor <u>Dana Hughes</u>							
Street Address <u>2871 Annabelle Ct.</u>				M <u>0</u>	D <u>8</u>	Y <u>1208</u>	Amount <u>50.00</u>
City <u>Cross City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Form (Cash, Check, etc.) <u>Cash</u>				
Full Name of Contributor <u>Susan Sharp</u>							
Street Address <u>77 Millstone Circle</u>				M <u>0</u>	D <u>8</u>	Y <u>1208</u>	Amount <u>50.00</u>
City <u>Putaskala</u>	State <u>OH</u>	Zip Code <u>43062</u>	Form (Cash, Check, etc.) <u>Cash</u>				
Full Name of Contributor <u>Takki Federer</u>							
Street Address <u>3512 Vintage Woods Dr.</u>				M <u>0</u>	D <u>8</u>	Y <u>1508</u>	Amount <u>50.00</u>
City <u>Hilliard</u>	State <u>OH</u>	Zip Code <u>43026</u>	Form (Cash, Check, etc.) <u>Check</u>				
Full Name of Contributor <u>Gene Hinterschield</u>							
Street Address <u>5856 Thorngate Dr.</u>				M <u>0</u>	D <u>8</u>	Y <u>1808</u>	Amount <u>25.00</u>
City <u>Calloway</u>	State <u>OH</u>	Zip Code <u>43119</u>	Form (Cash, Check, etc.) <u>Check</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.

Ross Chambers (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."