

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>Randall Wexler</u>				Registration Number, if PAC			
Street Address <u>540 Woodfield Ct.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
<u>City</u> <u>Gahanna</u>		State <u>OH</u>	Zip Code <u>43230</u>	<u>0</u>	<u>9</u>	<u>06</u>	<u>05</u> 100.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Robert Werth</u>				Registration Number, if PAC			
Street Address <u>4527 Tavistock Circle</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
<u>City</u> <u>Powell</u>		State <u>OH</u>	Zip Code <u>43065</u>	<u>0</u>	<u>9</u>	<u>06</u>	<u>05</u> 150.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>James Kime</u>				Registration Number, if PAC			
Street Address <u>2550 W. 5th Ave.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
<u>City</u> <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43204</u>	<u>0</u>	<u>9</u>	<u>06</u>	<u>05</u> 25.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Don Garlikov</u>				Registration Number, if PAC			
Street Address <u>251 S. Dawson Ave.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
<u>City</u> <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43209</u>	<u>0</u>	<u>9</u>	<u>06</u>	<u>05</u> 1,000.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Smith & Hale</u>				Registration Number, if PAC			
Street Address <u>37 W. Broad St.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
<u>City</u> <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	<u>0</u>	<u>9</u>	<u>12</u>	<u>05</u> 1,000.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Thomas Flesch</u>				Registration Number, if PAC			
Street Address <u>595 Cardinal Hill Ln.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
<u>City</u> <u>Powell</u>		State <u>OH</u>	Zip Code <u>43065</u>	<u>0</u>	<u>9</u>	<u>12</u>	<u>05</u> 100.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>C. Tad Hale</u>				Registration Number, if PAC			
Street Address <u>171 Mainsail Dr.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
<u>City</u> <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43081</u>	<u>0</u>	<u>9</u>	<u>12</u>	<u>05</u> 100.00
				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 \$ 2,475.00