

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

Prescribed by Secretary of State 2/01

| Name of Committee in Full | | | | | | | |
|---|-------------|---|--|-----------------------------------|---|------|----------|
| Committee for Joseph W. Testa | | | | Registration Number, if PAC | | | |
| Full Name of Contributor William Wells | | | | Amount | | | |
| Street Address 6241 Riverside Dr. | | Employer/Occupation/Labor Organization* | | M | D | Y | Amount |
| | | | | 1 | 1 | 0206 | 500.00 |
| City Dublin | State OH | Zip Code 43017 | | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Matthew Mnich | | | | Registration Number, if PAC | | | |
| Street Address 7895 Silver Lake Ct. | | | | Amount | | | |
| Street Address 7895 Silver Lake Ct. | | Employer/Occupation/Labor Organization* | | M | D | Y | Amount |
| | | | | 1 | 1 | 0206 | 1,000.00 |
| City Westerville | State OH | Zip Code 43082 | | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Jeffrey Glavan | | | | Registration Number, if PAC | | | |
| Street Address 92 Hanford St. | | | | Amount | | | |
| Street Address 92 Hanford St. | | Employer/Occupation/Labor Organization* | | M | D | Y | Amount |
| | | | | 1 | 1 | 0206 | 1,000.00 |
| City Columbus | State OH | Zip Code 43206 | | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Brian Kelleher | | | | Registration Number, if PAC | | | |
| Street Address 3994 The Old Post Rd. | | | | Amount | | | |
| Street Address 3994 The Old Post Rd. | | Employer/Occupation/Labor Organization* | | M | D | Y | Amount |
| | | | | 1 | 1 | 0206 | 500.00 |
| City Columbus | State OH | Zip Code 43221 | | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Scott Blackwell | | | | Registration Number, if PAC | | | |
| Street Address 6172 Columbus Pike | | | | Amount | | | |
| Street Address 6172 Columbus Pike | | Employer/Occupation/Labor Organization* | | M | D | Y | Amount |
| | | | | 1 | 1 | 0206 | 500.00 |
| City Lewis Center | State OH | Zip Code 43035 | | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Mark Herbst | | | | Registration Number, if PAC | | | |
| Street Address 12001 Stockwell Rd. | | | | Amount | | | |
| Street Address 12001 Stockwell Rd. | | Employer/Occupation/Labor Organization* | | M | D | Y | Amount |
| | | | | 1 | 1 | 0206 | 500.00 |
| City Sunbury | State OH | Zip Code 43074 | | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Crawford Smith | | | | Registration Number, if PAC | | | |
| Street Address 5675 Feder Rd. | | | | Amount | | | |
| Street Address 5675 Feder Rd. | | Employer/Occupation/Labor Organization* | | M | D | Y | Amount |
| | | | | 1 | 1 | 0206 | 500.00 |
| City Columbus | State OH | Zip Code 43228 | | Form (Cash, Check, etc.) Check | | | |

* 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

| | |
|--|--|
| | |
|--|--|

Total expenditures this event.

| | |
|--|--|
| | |
|--|--|

Page Total \$ 4,500.00