## Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Name of Committee in Full  Committee for Joseph W.  Full Name of Contributor	Tester		
Full Name of Contributor			
Chuck Coleman			
Street Address		1 1 1 1 1 1 1	Amount
3263 Benbrook Pond Dr.		083106	35-00
City	Sta te Zip Code	Form (Cash, Check, etc.)	
Hilliard	0 H 43026	Check	
Full Name of Contributor			
Janie Abraham			Amount
Street Address 2083 Park R. Dr.		083106	Amount
	Color 17: Col	Form (Cash, Check, etc.)	T
City	Sta te   Zip Code	Check etc.)	
Full Name of Contributor	0 11 73220		
Larie Ludlun			
Street Address		M D Y	Amount
1615 Dadee Ct.		083106	35.00
City	Sta te Zip Code	Form (Cash, Check, etc.)	
Columbia	0 11 43227	Check	
Full Name of Contributor			
Shelley May			
Street Address			Amount
12283 Cleo Dr.	·	083106	40.00
City	State Zip Code	Form (Cash, Check, etc.)	
Orient	a H 43146	Check	
Full Name of Contributor			
Eric Bush			
Street Address		083106	Amount 35-00
1072 Belford Ave	Strike Zin Code	Form (Cash, Check-etc.)	33-0
City	State Zip Code 243207	Form (Cash, Check etc.)	
Full Name of Contributor	1 /		
Barb Fisher			
Street Address		M D Y	Amount
3586 Westbury Circle		083106	100-00
City	Sta te Zip Code	Form (Cash, Check, etc.)	
Lewis Center	0 H 43035	Check	
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 the first that each contribution was voluntarily made.			
(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 No. 31-G."