

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

Prescribed by Secretary of State 2/01

|                                                                         |  |                                         |                          |                                          |   |   |        |
|-------------------------------------------------------------------------|--|-----------------------------------------|--------------------------|------------------------------------------|---|---|--------|
| Name of Committee in Full<br><u>Committee for Joseph W. Testa</u>       |  |                                         |                          |                                          |   |   |        |
| Full Name of Contributor<br><u>Marianne Collins</u>                     |  |                                         |                          | Registration Number, if PAC              |   |   |        |
| Street Address<br><u>423 Hickory Ln.</u>                                |  | Employer/Occupation/Labor Organization* |                          | M                                        | D | Y | Amount |
| City<br><u>Westerville</u>                                              |  | State<br><u>OH</u>                      | Zip Code<br><u>43081</u> | Form (Cash, Check, etc.)<br><u>Check</u> |   |   |        |
| Full Name of Contributor<br><u>Civil Engineers for Civil Government</u> |  |                                         |                          | Registration Number, if PAC              |   |   |        |
| Street Address<br><u>12855 Wheaton Ave.</u>                             |  | Employer/Occupation/Labor Organization* |                          | M                                        | D | Y | Amount |
| City<br><u>Pickerington</u>                                             |  | State<br><u>OH</u>                      | Zip Code<br><u>43147</u> | Form (Cash, Check, etc.)<br><u>Check</u> |   |   |        |
| Full Name of Contributor<br><u>Montgomery for Recorder</u>              |  |                                         |                          | Registration Number, if PAC              |   |   |        |
| Street Address<br><u>865 Macan Alley</u>                                |  | Employer/Occupation/Labor Organization* |                          | M                                        | D | Y | Amount |
| City<br><u>Columbus</u>                                                 |  | State<br><u>OH</u>                      | Zip Code<br><u>43206</u> | Form (Cash, Check, etc.)<br><u>Check</u> |   |   |        |
| Full Name of Contributor<br><u>William Lafferty</u>                     |  |                                         |                          | Registration Number, if PAC              |   |   |        |
| Street Address<br><u>3146 Wallingford Ave.</u>                          |  | Employer/Occupation/Labor Organization* |                          | M                                        | D | Y | Amount |
| City<br><u>Columbus</u>                                                 |  | State<br><u>OH</u>                      | Zip Code<br><u>43231</u> | Form (Cash, Check, etc.)<br><u>Cash</u>  |   |   |        |
| Full Name of Contributor<br><u>Committee for Dorey Stokes</u>           |  |                                         |                          | Registration Number, if PAC              |   |   |        |
| Street Address<br><u>750 Willow Bend Ln.</u>                            |  | Employer/Occupation/Labor Organization* |                          | M                                        | D | Y | Amount |
| City<br><u>Columbus</u>                                                 |  | State<br><u>OH</u>                      | Zip Code<br><u>43204</u> | Form (Cash, Check, etc.)<br><u>Check</u> |   |   |        |
| Full Name of Contributor<br><u>Robert Williams</u>                      |  |                                         |                          | Registration Number, if PAC              |   |   |        |
| Street Address<br><u>7188 Pebble Way Ct.</u>                            |  | Employer/Occupation/Labor Organization* |                          | M                                        | D | Y | Amount |
| City<br><u>Worthington</u>                                              |  | State<br><u>OH</u>                      | Zip Code<br><u>43235</u> | Form (Cash, Check, etc.)<br><u>Check</u> |   |   |        |
| Full Name of Contributor<br><u>Pizzuti PAC</u>                          |  |                                         |                          | Registration Number, if PAC              |   |   |        |
| Street Address<br><u>Two Miranda Pl.</u>                                |  | Employer/Occupation/Labor Organization* |                          | M                                        | D | Y | Amount |
| City<br><u>Columbus</u>                                                 |  | State<br><u>OH</u>                      | Zip Code<br><u>43215</u> | Form (Cash, Check, etc.)<br><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

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

Total expenditures this event.

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

Page Total \$ 2,100.00