

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

Prescribed by Secretary of State 2/01

Name of Committee in Full <i>Committee for Joseph W. Tests</i>				Registration Number, if PAC			
Full Name of Contributor <i>John Haveisen</i>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Street Address <i>587 Fox Ln.</i>				<i>0</i>	<i>9</i>	<i>0</i>	<i>100.00</i>
City <i>Worthington</i>		State <i>OH</i>	Zip Code <i>43085</i>	Form (Cash, Check, etc.) <i>Check</i>			
Full Name of Contributor <i>Tony Frisora</i>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Street Address <i>1470 Cypresswood Ct</i>				<i>1</i>	<i>0</i>	<i>2</i>	<i>35.00</i>
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43229</i>	Form (Cash, Check, etc.) <i>Check</i>			
Full Name of Contributor <i>Barbara Lach</i>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Street Address <i>3910 Lyon Dr.</i>				<i>1</i>	<i>0</i>	<i>2</i>	<i>35.00</i>
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43220</i>	Form (Cash, Check, etc.) <i>Check</i>			
Full Name of Contributor <i>Doug McCloud</i>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Street Address <i>1666 Birdsong Ct.</i>				<i>1</i>	<i>0</i>	<i>2</i>	<i>100.00</i>
City <i>Blacklick</i>		State <i>OH</i>	Zip Code <i>43004</i>	Form (Cash, Check, etc.) <i>Check</i>			
Full Name of Contributor <i>Blaine Sickles</i>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Street Address <i>7997 Clark Ave.</i>				<i>1</i>	<i>0</i>	<i>2</i>	<i>25.00</i>
City <i>Dublin</i>		State <i>OH</i>	Zip Code <i>43017</i>	Form (Cash, Check, etc.) <i>Check</i>			
Full Name of Contributor <i>Tom Taneff</i>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Street Address <i>600 S. High St.</i>				<i>1</i>	<i>0</i>	<i>2</i>	<i>35.00</i>
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43215</i>	Form (Cash, Check, etc.) <i>Check</i>			
Full Name of Contributor <i>James O'Block</i>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Street Address <i>2618 Hoover Crossing</i>				<i>1</i>	<i>0</i>	<i>2</i>	<i>70.00</i>
City <i>Greene City</i>		State <i>OH</i>	Zip Code <i>43123</i>	Form (Cash, Check, etc.) <i>Check</i>			

* 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 \$ 400.00