

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Committee for Joseph W. Testa</u>					
Full Name of Contributor <u>Beckie Knore</u>					
Street Address <u>5410 Harlem Rd.</u>				M <u>0</u>	D <u>5</u>
				Y <u>06</u>	Amount <u>35.00</u>
City <u>New Albany</u>	State <u>OH</u>	Zip Code <u>43054</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Tina Tate</u>					
Street Address <u>6356 Rigosa Ave.</u>				M <u>0</u>	D <u>5</u>
				Y <u>06</u>	Amount <u>25.00</u>
City <u>Reynoldsburg</u>	State <u>OH</u>	Zip Code <u>43068</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Shaun James</u>					
Street Address <u>10823 Buckingham Pl.</u>				M <u>0</u>	D <u>5</u>
				Y <u>06</u>	Amount <u>35.00</u>
City <u>Powell</u>	State <u>OH</u>	Zip Code <u>43065</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Bob Mondt</u>					
Street Address <u>1418 Terry Dr.</u>				M <u>0</u>	D <u>5</u>
				Y <u>06</u>	Amount <u>35.00</u>
City <u>Reynoldsburg</u>	State <u>OH</u>	Zip Code <u>43068</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Gary Haynes</u>					
Street Address <u>239 Prince of Wales Dr.</u>				M <u>0</u>	D <u>5</u>
				Y <u>06</u>	Amount <u>50.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43230</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Gene Hinterschied</u>					
Street Address <u>5856 Thornside Dr.</u>				M <u>0</u>	D <u>5</u>
				Y <u>06</u>	Amount <u>25.00</u>
City <u>Calloway</u>	State <u>OH</u>	Zip Code <u>43119</u>		Form (Cash, Check, etc.) <u>Check</u>	

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 County Auditor. I hereby affirm that each contribution was voluntarily made.

PG. Charles (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 form No. 31-G."