

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

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Committee for Joseph W. Testa</u>					
Full Name of Contributor <u>Tiberi for Congress</u>				Registration Number, if PAC	
Street Address <u>2021 E. Dub Granville Rd.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43229</u>	Y <u>0</u>	Amount <u>600.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Metz & Bailey</u>				Registration Number, if PAC	
Street Address <u>33 E. Schrock Rd.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43081</u>	Y <u>0</u>	Amount <u>100.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Ohio Petroleum Retailers & Repair Assn</u>				Registration Number, if PAC <u>C00139105</u>	
Street Address <u>947 E. Johnstown Rd.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Gahanna</u>		State <u>OH</u>	Zip Code <u>43230</u>	Y <u>0</u>	Amount <u>300.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Thomas Burrows</u>				Registration Number, if PAC	
Street Address <u>2655 McVey Blvd</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43235</u>	Y <u>0</u>	Amount <u>75.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Randall Ayers</u>				Registration Number, if PAC	
Street Address <u>2725 Woodland Trail</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43231</u>	Y <u>0</u>	Amount <u>50.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Joseph Armeni</u>				Registration Number, if PAC	
Street Address <u>295 W. 4th Ave.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43201</u>	Y <u>0</u>	Amount <u>200.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Total Employees Contributions From Form 31-G</u>				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D
City		State	Zip Code	Y	Amount <u>500.00</u>
				Form (Cash, Check, etc.)	

* 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 \$ 1,825.00