31-F R.C. 3517.10 Page _ 29___

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

	and a record of the state of th				
Name of Committee in Full					
Connitée & Joseph W. Teste					
Whom Paid				M D Y	Amount
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City	54	le	Zip Code	Check I tallion	

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

Page Total \$ 369-83 V