

# 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>Tony Frissora</u>				
Street Address <u>520 Preservation Ln.</u>				M   D   Y   Amount <u>1</u>   <u>0</u>   <u>2</u>   <u>4</u>   <u>0</u>   <u>7</u>   <u>70.00</u>
City <u>Cahanna</u>	State <u>OH</u>	Zip Code <u>43230</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Kimberl Stroud</u>				
Street Address <u>947 Chama Ln.</u>				M   D   Y   Amount <u>1</u>   <u>0</u>   <u>2</u>   <u>4</u>   <u>0</u>   <u>7</u>   <u>35.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43240</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Ed O'Block</u>				
Street Address <u>5765 Stevens Dr.</u>				M   D   Y   Amount <u>1</u>   <u>0</u>   <u>2</u>   <u>5</u>   <u>0</u>   <u>7</u>   <u>35.00</u>
City <u>Orient</u>	State <u>OH</u>	Zip Code <u>43146</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Marj Kruse</u>				
Street Address <u>1733 White Rd.</u>				M   D   Y   Amount <u>1</u>   <u>0</u>   <u>2</u>   <u>5</u>   <u>0</u>   <u>7</u>   <u>100.00</u>
City <u>Grace City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Cindi Becker</u>				
Street Address <u>3046 Better Woods Dr.</u>				M   D   Y   Amount <u>1</u>   <u>0</u>   <u>2</u>   <u>5</u>   <u>0</u>   <u>7</u>   <u>35.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43231</u>	Form (Cash, Check, etc.) <u>Cash</u>	
Full Name of Contributor <u>Ken Perry</u>				
Street Address <u>170 Laurel Dr.</u>				M   D   Y   Amount <u>1</u>   <u>0</u>   <u>2</u>   <u>5</u>   <u>0</u>   <u>7</u>   <u>70.00</u>
City <u>Pataskala</u>	State <u>OH</u>	Zip Code <u>43062</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.

[Signature] (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."