

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>Brenda Toops</u>					
Street Address <u>3424 Arnsby Rd.</u>				M <u>1</u>	D <u>0</u>
City <u>Columbs</u>				Y <u>0</u>	Amount <u>35.00</u>
State <u>OH</u>		Zip Code <u>43232</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Teri Fowler</u>					
Street Address <u>7858 Iris Ct.</u>				M <u>1</u>	D <u>0</u>
City <u>Canal Winchester</u>				Y <u>0</u>	Amount <u>50.00</u>
State <u>OH</u>		Zip Code <u>43110</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Laurie Ludlum</u>					
Street Address <u>1615 Dundae Ct.</u>				M <u>1</u>	D <u>0</u>
City <u>Columbus</u>				Y <u>0</u>	Amount <u>35.00</u>
State <u>OH</u>		Zip Code <u>43227</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Michelle Clark</u>					
Street Address <u>13412 W. Bank Dr.</u>				M <u>1</u>	D <u>0</u>
City <u>Millersport</u>				Y <u>0</u>	Amount <u>35.00</u>
State <u>OH</u>		Zip Code <u>43046</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Jamie Abraham</u>					
Street Address <u>2083 Park Run Dr.</u>				M <u>1</u>	D <u>0</u>
City <u>Columbus</u>				Y <u>0</u>	Amount <u>35.00</u>
State <u>OH</u>		Zip Code <u>43220</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Gary Woodward</u>					
Street Address <u>4665 Brixshire Dr.</u>				M <u>1</u>	D <u>0</u>
City <u>Hilliard</u>				Y <u>0</u>	Amount <u>35.00</u>
State <u>OH</u>		Zip Code <u>43026</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.

DA. Chh (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."