

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

Prescribed by Secretary of State 2/01

Name of Committee in Full <i>Committee for Joseph W. Testa</i>					
Full Name of Contributor <i>Montgomery for Recorder</i>				Registration Number, if PAC	
Street Address <i>865 Macon Alley</i>		Employer/Occupation/Labor Organization*		M D Y <i>07 19 07</i>	Amount <i>350.00</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43206</i>		Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Griffith & Worth</i>				Registration Number, if PAC	
Street Address <i>522 N. State St.</i>		Employer/Occupation/Labor Organization*		M D Y <i>07 23 07</i>	Amount <i>150.00</i>
City <i>Westerville</i>	State <i>OH</i>	Zip Code <i>43082</i>		Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Central Ohio Realtors PAC</i>				Registration Number, if PAC <i>CP401</i>	
Street Address <i>2700 Airport Dr.</i>		Employer/Occupation/Labor Organization*		M D Y <i>07 23 07</i>	Amount <i>1,000.00</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43219</i>		Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Pizzuti PAC</i>				Registration Number, if PAC <i>OH1260</i>	
Street Address <i>Two Miranova Pl.</i>		Employer/Occupation/Labor Organization*		M D Y <i>07 23 07</i>	Amount <i>600.00</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43215</i>		Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Bricker & Eckler LLP</i>				Registration Number, if PAC <i>OH821</i>	
Street Address <i>100 S. Third St.</i>		Employer/Occupation/Labor Organization*		M D Y <i>07 23 07</i>	Amount <i>150.00</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43215</i>		Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Downes, Hurst & Fishel</i>				Registration Number, if PAC	
Street Address <i>400 S. 5TH ST.</i>		Employer/Occupation/Labor Organization*		M D Y <i>07 23 07</i>	Amount <i>200.00</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43215</i>		Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Gerald Hinkle</i>				Registration Number, if PAC	
Street Address <i>P.O. Box 20246</i>		Employer/Occupation/Labor Organization*		M D Y <i>07 23 07</i>	Amount <i>620.00</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43220</i>		Form (Cash, Check, etc.) <i>Check</i>	

* 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 \$ 3,070.00