31-E R.C. 3517.10(B)

Event Date 3/12/07

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

Prescribed by Secretary of State 2/01			
Name of Committee in Full			
Committee for Joseph 1	W. Testa		
Full Name of Contributor	1	Registration Number, if PAC	
Columbs Apartment 1	ssn.	OH146	
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
1225 Roblin Rd		031307 1,000.00	
City	Sta te Zip Code	Form (Cash, Check, etc.)	
Columbia	0 H 43215	Check	
Full Name of Contributor	·	Registration Number, if PAC	
Mark Arnold			
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
13435 M. Inor Rd.		031307 150.00	
City /	Stal te Zip Code	Form (Cash, Check, etc.)	
Pickerinsten	0 H 43147	Check	
Full Name of Contributor		Registration Number, if PAC	
Jeff Miller			
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
1 1 1	amployer overprise succession organismos.	031307500.00	
City Hemitage U.	Sta te Zip Code	Form (Cash, Check, etc.)	
Westwarille	0 H 43082	Check	
Full Name of Contributor		Registration Number, if PAC	
Rex Elsass			
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
\sim \sim \sim \sim \sim \sim \sim \sim	Employer/Occupation Buson Organization	031307300.00	
9110 lastan ticlds Dr.	Stal te Zip Code	Form (Cash, Check, etc.)	
Dahla	0 4 43017	Check	
Full Name of Contributor		Registration Number, if PAC	
(- 1 (h . +			
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
114 Dahasta Sa	Employer occupation and or organization	031307 600-00	
City City	Sta te Zip Code	Form (Cash, Check, etc.)	
11/2-6-11/2	OH 43081	Chrak	
Full Name of Contributor		Registration Number, if PAC	
AFPD Chio PAC		CP1331	
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
30415 W. 13 Mile Ro		031307 150.00	
City -	Sta te Zip Code	Form (Cash, Check, etc.)	
I = I + I + I = I	m I 48334	Chrat	
Full Name of Contributor	1 / 1	Registration Number, if PAC	
TI			
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
5412 Thomhill Ct		031307150.00	
City C	Sta te Zip Code	Form (Cash, Check, etc.)	
Car Cat	0 H 43123	Check	
Ulak City			
* Required for contributions from individuals over \$100 to statewide and 0	General Assembly candidates. If contributor is self-employ	red, occupation rather than	
employer should be listed. If two or more employees contribute via payre which the employees are members, if any, must also appear. [R.C. 3517.]	oll deduction and exceed the aggregate of \$100, the labor of	organization of	
which the employees are members, it any, must also uppear. [N.C. 3317.			

* Required for contributions from individuals over \$100 to statewide and General Assembly candidate employer should be listed. If two or more employees contribute via payroll deduction and exceed the which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]	es. If contributor is self-employed, occupation rather e aggregate of \$100, the labor organization of	than
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 states.	te "Contributions from form No. 31-E" and list the da	te of the event in the date column
Total contributions this event	Total expenditures this event.	
.eq./Fign- endalma Jugit -		Page Total \$ 2,850.00