

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

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Committee for Joseph W. Testa</u>					
Full Name of Contributor <u>Dr. Lewis for Coroner Committee</u>				Registration Number, if PAC	
Street Address <u>52 E. Gay St.</u>		Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>20</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	Y <u>06</u>	Amount <u>150.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Mcram Brachman</u>					
Street Address <u>311 N. Drexel Ave.</u>		Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>23</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43209</u>	Y <u>06</u>	Amount <u>200.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Paul Loper</u>					
Street Address <u>6321 E. Livingston Ave.</u>		Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>23</u>
City <u>Reynoldsburg</u>		State <u>OH</u>	Zip Code <u>43068</u>	Y <u>06</u>	Amount <u>500.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Greg Comfort</u>					
Street Address <u>2275 Chandaga Dr.</u>		Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>23</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43221</u>	Y <u>06</u>	Amount <u>250.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Nelson Kohman</u>					
Street Address <u>10039 Hollow Rd.</u>		Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>23</u>
City <u>Pataskala</u>		State <u>OH</u>	Zip Code <u>43062</u>	Y <u>06</u>	Amount <u>250.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Cheryl Klekotka</u>					
Street Address <u>6937 Whitetail Ln.</u>		Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>23</u>
City <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43082</u>	Y <u>06</u>	Amount <u>50.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Jeff Edwards</u>					
Street Address <u>495 S. High St.</u>		Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>23</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	Y <u>06</u>	Amount <u>150.00</u>
Form (Cash, Check, etc.) <u>Check</u>					

* 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 \$ 1,550.00