

# 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>Robert J. Weiler</u>				Registration Number, if PAC	
Street Address <u>41 S. High St.</u>		Employer/Occupation/Labor Organization*		M   D   Y <u>01   16   06</u>	Amount <u>2,500.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43215</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Vonys, Suter, Seymour &amp; Pease LLP</u>				Registration Number, if PAC <u>OH108</u>	
Street Address <u>52 E. Gay St.</u>		Employer/Occupation/Labor Organization*		M   D   Y <u>01   18   06</u>	Amount <u>2,500.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43215</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Rob Schuler</u>				Registration Number, if PAC	
Street Address <u>8225 Greg Abby Ct.</u>		Employer/Occupation/Labor Organization*		M   D   Y <u>01   20   06</u>	Amount <u>2,500.00</u>
City <u>Dublin</u>	State <u>OH</u>	Zip Code <u>43017</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Pete McCann</u>				Registration Number, if PAC	
Street Address <u>P.O. Box 416</u>		Employer/Occupation/Labor Organization*		M   D   Y <u>01   20   06</u>	Amount <u>2,500.00</u>
City <u>Groveport</u>	State <u>OH</u>	Zip Code <u>43125</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>George Henry</u>				Registration Number, if PAC	
Street Address <u>555 S. Front St.</u>		Employer/Occupation/Labor Organization*		M   D   Y <u>01   20   06</u>	Amount <u>2,500.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43215</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Steve Testa</u>				Registration Number, if PAC	
Street Address <u>1611 Jewett Rd.</u>		Employer/Occupation/Labor Organization*		M   D   Y <u>01   20   06</u>	Amount <u>2,500.00</u>
City <u>Powell</u>	State <u>OH</u>	Zip Code <u>43065</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Henry O'Neill</u>				Registration Number, if PAC	
Street Address <u>3050 Carriage Ln.</u>		Employer/Occupation/Labor Organization*		M   D   Y <u>01   20   06</u>	Amount <u>1,000.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43221</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 \$ 16,000.00