

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>Ross Chambers</u> | | | | |
| Street Address <u>12364 Thoroughbred Dr.</u> | | | M <u>1</u> | D <u>0</u> |
| City <u>Pickerington</u> | | | Y <u>1</u> | Amount <u>70.00</u> |
| State <u>OH</u> | | | Form (Cash, Check, etc.) <u>Check</u> | |
| Full Name of Contributor <u>Sally Danceski</u> | | | | |
| Street Address <u>9658 Wagonwood Dr.</u> | | | M <u>1</u> | D <u>0</u> |
| City <u>Pickerington</u> | | | Y <u>1</u> | Amount <u>35.00</u> |
| State <u>OH</u> | | | Form (Cash, Check, etc.) <u>Check</u> | |
| Full Name of Contributor <u>Barb Fisher</u> | | | | |
| Street Address <u>3586 W. Bay Circle</u> | | | M <u>1</u> | D <u>0</u> |
| City <u>Lewis Center</u> | | | Y <u>1</u> | Amount <u>35.00</u> |
| State <u>OH</u> | | | Form (Cash, Check, etc.) <u>Check</u> | |
| Full Name of Contributor <u>Gene Hinterschied</u> | | | | |
| Street Address <u>5856 Thorngate Dr.</u> | | | M <u>1</u> | D <u>0</u> |
| City <u>Gallaway</u> | | | Y <u>1</u> | Amount <u>25.00</u> |
| State <u>OH</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>1</u> | Amount <u>35.00</u> |
| State <u>OH</u> | | | Form (Cash, Check, etc.) <u>Check</u> | |
| Full Name of Contributor <u>Gene Hinterschied</u> | | | | |
| Street Address <u>5856 Thorngate Dr.</u> | | | M <u>1</u> | D <u>1</u> |
| City <u>Gallaway</u> | | | Y <u>1</u> | Amount <u>25.00</u> |
| State <u>OH</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.

R.C. Chambers (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."