

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>Joe Walker</u>				Registration Number, if PAC	
Street Address <u>8210 Chateau Ln.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>8</u>
City <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43082</u>	Y <u>07</u>	Amount <u>150.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Mike Minister</u>					
Street Address <u>65 E. State St</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	Y <u>07</u>	Amount <u>200.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Greg Nelson</u>					
Street Address <u>15777 Watkins Rd.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>
City <u>Mansville</u>		State <u>OH</u>	Zip Code <u>43040</u>	Y <u>07</u>	Amount <u>200.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Art Russo</u>					
Street Address <u>105 Preston Rd.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43209</u>	Y <u>07</u>	Amount <u>250.00</u>
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Total Employee Contributions From Form 31-G</u>					
Street Address		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>
City		State	Zip Code	Y <u>07</u>	Amount <u>2,200.00</u>
Form (Cash, Check, etc.)					
Full Name of Contributor					
Street Address		Employer/Occupation/Labor Organization*		M	D
City		State	Zip Code	Y	Amount
Form (Cash, Check, etc.)					

* 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 \$ 3,000.00