31-	J-	1
R.C.	35	17.10

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In-Kind Contributions Received

Prescribed by Secretary of State 2/01

		-		
Name of Committee in Full Connittee for Joseph W. Testa Full Name of Contributor Kichael Rajec Description of Item or Service M. D. Y. Fair Market Value				
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC		
Richard Rojet	2.mp.o.y., 0.00 p.m.o.,			
Street Address _ / /	Description of Item or Service	M D Y Fair Market Value		
1480 Deblin Kd.	Food i Berease	102506832.11		
City	Sta te Zip Code	Received at Fundraising Event?		
Columbis	0 H 43215	YES 🗆 NO		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC		
	Description of Item or Service	M D Y Fair Market Value		
Street Address	Description of field of Between			
City	Sta te Zip Code	Received at Fundraising Event?		
		□ YES □ NO		
		☐ YES ☐ NO Registration Number, if PAC		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if FAC		
Street Address	Description of Item or Service	M D Y Fair Market Value		
	Cult. 72: C-1-	Received at Fundraising Event?		
City	Sta te Zip Code	Vecelaen at Lauraraising Bacuts		
		☐ YES ☐ NO		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC		
Fill Manie of Controllor				
Street Address	Description of Item or Service	M D Y Fair Market Value		
	Sta te Zip Code	Received at Fundraising Event?		
City	Zip Gode			
	<u> </u>	☐ YES ☐ NO		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC		
	•			
	Description of the search of t	M D Y Fair Market Value		
Street Address	Description of Item or Service	IVI D I I II IVIII KEI VIII KEI		
City	Sta te Zip Code	Received at Fundraising Event?		
		☐ YES ☐ NO		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC		
		·		
Street Address	Description of Item or Service	M D Y Fair Market Value		
Direct Addition				
City	Sta te Zip Code	Received at Fundraising Event?		
		□ YES □ NO		
Evil Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC		
Full Name of Contributor	Employer, Occupation, Paper Officiation			
Street Address	Description of Item or Service	M D Y Fair Market Value		
İ				
	State Zip Code	Received at Fundraising Event?		
City	Sta te Zip Code	Received at 1 dilutaioning Events		
· ·		☐ YES ☐ NO		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC		
37 5511112				
		34 D 34 D-1-24-4-47-1		
Street Address	Description of Item or Service	M D Y Fair Market Value		
d .				
City	Sta te Zip Code	Received at Fundraising Event?		
O.L.				
		☐ YES ☐ NO		
	· · · · · · · · · · · · · · · · · · ·			

^{*} 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)]