

# 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>Gary Haynes</u>				
Street Address <u>239 Prince of Wales Dr.</u>				M   D   Y   Amount <u>03</u>   <u>05</u>   <u>07</u>   <u>75.00</u>
City <u>Gahanna</u>	State <u>OH</u>	Zip Code <u>43230</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Michelle Click</u>				
Street Address <u>13412 W. Bank Dr.</u>				M   D   Y   Amount <u>03</u>   <u>06</u>   <u>07</u>   <u>75.00</u>
City <u>Millersport</u>	State <u>OH</u>	Zip Code <u>43046</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Sally Dancoski</u>				
Street Address <u>9658 Wasenwood Dr.</u>				M   D   Y   Amount <u>03</u>   <u>06</u>   <u>07</u>   <u>100.00</u>
City <u>Pickerington</u>	State <u>OH</u>	Zip Code <u>43147</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Chris Holdrieth</u>				
Street Address <u>5547 Channing Way</u>				M   D   Y   Amount <u>03</u>   <u>09</u>   <u>07</u>   <u>75.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43213</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Sharon James</u>				
Street Address <u>8682 Davington Dr.</u>				M   D   Y   Amount <u>03</u>   <u>13</u>   <u>07</u>   <u>75.00</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>Gary Woodward</u>				
Street Address <u>4665 Brixshire Dr.</u>				M   D   Y   Amount <u>03</u>   <u>13</u>   <u>07</u>   <u>75.00</u>
City <u>Hilliard</u>	State <u>OH</u>	Zip Code <u>43026</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.

[Signature] (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."