

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full <i>Committee for Joseph W. Tests</i>				
Full Name of Contributor <i>Gene Hinterschized</i>				
Street Address <i>5856 Thornsgate Dr.</i>				M D Y Amount <i>09 06 05 25-00</i>
City <i>Galloway</i>	State <i>OH</i>	Zip Code <i>43119</i>	Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Gene Hinterschized</i>				
Street Address <i>5856 Thornsgate Dr.</i>				M D Y Amount <i>09 16 05 25-00</i>
City <i>Galloway</i>	State <i>OH</i>	Zip Code <i>43119</i>	Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Gene Hinterschized</i>				
Street Address <i>5856 Thornsgate Dr.</i>				M D Y Amount <i>10 03 05 25-00</i>
City <i>Galloway</i>	State <i>OH</i>	Zip Code <i>43119</i>	Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Michelle Merrick</i>				
Street Address <i>6454 Fox Hill Dr.</i>				M D Y Amount <i>10 05 05 35-00</i>
City <i>Canal Winchester</i>	State <i>OH</i>	Zip Code <i>43110</i>	Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Sharon Evaline</i>				
Street Address <i>2350 Demorest Rd.</i>				M D Y Amount <i>10 05 05 35-00</i>
City <i>Grave City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>Angie Musselman</i>				
Street Address <i>12999 Ridgeway Rd.</i>				M D Y Amount <i>10 05 05 35-00</i>
City <i>Orient</i>	State <i>OH</i>	Zip Code <i>43146</i>	Form (Cash, Check, etc.) <i>Check</i>	

The above are employees of a unit or department under the direct supervision and control of Joseph W. Tests, who currently holds the public office of County Auditor. I hereby affirm that each contribution was voluntarily made.

PCU Chlu (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."