

# 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>John Price</u>				Registration Number, if PAC			
Street Address <u>505 Whitney Ave.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Worthington</u>		State <u>OH</u>	Zip Code <u>43085</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>05</u> 35.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Nancy Taylor</u>				Registration Number, if PAC			
Street Address <u>701 Morning St.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Worthington</u>		State <u>OH</u>	Zip Code <u>43085</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>05</u> 35.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Nancy Taylor</u>				Registration Number, if PAC			
Street Address <u>701 Morning St.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Worthington</u>		State <u>OH</u>	Zip Code <u>43085</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>05</u> 35.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Shoemaker, Hawthorn &amp; Taylor LLP</u>				Registration Number, if PAC			
Street Address <u>471 E. Broad St.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>05</u> 50.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Downes, Hunt &amp; Fisher</u>				Registration Number, if PAC			
Street Address <u>400 S. 5TH St.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>05</u> 70.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Dan McClard</u>				Registration Number, if PAC			
Street Address <u>1666 Birdsong Ct.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Blacklick</u>		State <u>OH</u>	Zip Code <u>43004</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>05</u> 100.00
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Mark Arnold</u>				Registration Number, if PAC			
Street Address <u>13435 Miller Rd.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Pickerington</u>		State <u>OH</u>	Zip Code <u>43147</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>20</u> 70.00
				Form (Cash, Check, etc.) <u>Check</u>			

\* 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 \$ 395.00