31-E R.C. 3517.10(B)

## **Statement of Contributions Received** at a Social or Fund-Raising Event

Event Date	3/12/07
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	Prescribed by Secretary of State 2/01	
Name of Committee in Full	1	
Committee for Joseph	W. lests	Registration Number, if PAC
Full Name of Contributor		Registration Number, it is
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
600 5. Hish St.		031307 100.00
City	State Zip Code 43215	Form (Cash, Check, etc.)
Full Name of Contributor	0 H 43213	Registration Number, if PAC
Ron Sams		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
138 Janai K Ct.	Stal te Zip Code	0 3 / 3 0 7 / 00 - 00   Form (Cash, Check, etc.)
City	Sta te Zip Code 4-32-07	Check
Full Name of Contributor		Registration Number, if PAC
James Kine		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount 5.00
2550 W 5 1 Ac	Stal te Zip Code	Form (Cash, Check, etc.)
Colmbs	0 1-1 43204	Check
Full Name of Contributor		Registration Number, if PAC
Jon Shackel ford		M D Y Amount
21 E Stat St	Employer/Occupation/Labor Organization*	03/307 225-00
City /	Sta te Zip Code	Form (Cash, Check, etc.)
Columbs	0 H 43215	Check
Full Name of Contributor		Registration Number, if PAC
Vna Hvnter Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
4076 E. Main St.		031307 150.00
City	Sta te   Zip Code   43213	Form (Cash, Check, etc.)
Full Name of Contributor	0 H 43213	Registration Number, if PAC
San Koon		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
City C	Stal te Zip Code	0 3 / 3 0 7 / 50 - 00 Form (Cash, Check, etc.)
Colorado	0 4 43215	Check
Full Name of Contributor		Registration Number, if PAC
Huntington Boncshares	PAC	CO0165589
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount 300.00
City	Sta te Zip Code	Form (Cash, Check, etc.)
Colombia	0 H 43215	Check
* Required for contributions from individuals over \$100 to statewide and	General Assembly candidates If contributor is self-emplo	ved, occupation rather than
employer should be listed. If two or more employees contribute via pay	roll deduction and exceed the aggregate of \$100, the labor	organization of
which the employees are members, if any, must also appear. [R.C. 3517	(\frac{1\frac{1}{2}}{2})	

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		Total expenditures this event.	
	and an filed to	·	Page Total \$ <u>1, 630</u> . 00