31-E R.C. 3517.10(B)

## Event Date 5/8/07

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

	Prescribed by Secretary of State 2/01	
Name of Committee in Full		
Committee for Joseph W	V. Testa	
Full Name of Contributor		Registration Number, if PAC
Paul Lopes		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
6321 E. Livingston Are		050707 70.00
City	Sta te Zip Code	Form (Cash, Check, etc.)
Keynoldsbar	0 4 43068	Check
Full Name of Contributor		Registration Number, if PAC
Jameson Crane		M D Y Amount
Street Address	Employer/Occupation/Labor Organization*	
299 N. Parkview	Stal te Zip Code	6 5 6 7 6 7 25 6 60 Form (Cash, Check, etc.)
City	0 H 43209	
Full Name of Contributor	C A TSZE!	Registration Number, if PAC
Bob Monds		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
1418 T== D		050907 35.00
City /	State Zip Code	Form (Cash, Check, etc.)
Keynoldsbys	0 H 43068	Check
Full Name of Contributor		Registration Number, if PAC
Kay Parken		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
104 S. bald Kd.	7. 0.4	0 5 0 9 0 7 35 - 00 Form (Cash, Check, etc.)
City	Sta te   Zip Code	
Full Name of Contributor	0 1-1 43209	Registration Number, if PAC
Pull Name of Contributor		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
6082 Menorial Dr.	Employen occupation Europe Organization	050907 35-00
City_	Sta te Zip Code	Form (Cash, Check, etc.)
Dalia	0 H 43017	Check
Full Name of Contributor		Registration Number, if PAC
Shoemater Howarth & 10	and lor	
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
471 E. Broad St.		052407 50.00
City	State Zip Code	Form (Cash, Check, etc.)
Columbs	0 H 43215	Registration Number, if PAC
Full Name of Contributor	s Fan Form 31-6	
Total Emplayee Contribation	5 Fan Forn 31-6	M D Y Amount
Street Address	Employer/Occupation/Labor Organization*	1,685.00
City	Stal te Zip Code	Form (Cash, Check, etc.)
1		THE CONTROL OF THE PROPERTY SAIR
* Required for contributions from individuals over \$100 to statewide and Gene	ral Assembly candidates. If contributor is self-employed	ed, occupation rather than
employer should be listed. If two or more employees contribute via payroll de which the employees are members, if any, must also appear. [R.C. 3517.10(B	eduction and exceed the aggregate of \$100, the fabor of	ganization of

Total contributions this event		Total expenditures this event.	
	, of a Tells 		Page Total \$ 2,160,00