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## Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full		
Name of Committee in Full  Committee for Joseph W. Testa  Full Name of Contributor		
Committee tor Joseph W. 14sta		
Street Address		
Street Address		M D Y Amount
520 Preservation Ln.		072307 150-00
City	Sta te Zip Code	Form (Cash, Check, etc.)
Gahana	OH 43230	Check
Full Name of Contributor		
Mark Colhan		
0: 111		M D Y Amount
57.41 De = 1)a		072307 150.00
Street Address  5641 Do sey Dr.  City C 1 1	Sta te Zip Code	Form (Cash, Check, etc.)
Colmbs	0 H 43235	Check
Full Name of Contributor		
George Mance Street Address		
Street Address		M D Y Amount
P.O. Box 9006		072307 150.00
City	State Zip Code	Form (Cash, Check, etc.)
Colombis	0 H 43209	Check
Full Name of Contributor		
Susan Bradshaw		
Street Address		M D Y Amount
473 Slate Run Dr.		072307 25.00
City _	Sta te Zip Code	Form (Cash, Check, etc.)
Proell	0 H 43065	Check
Full Name of Contributor		
Michelle May		
		M D Y Amount
12283 Cleo Dr.		072307 50.00
City	State Zip Code 4-3 146	Form (Cash, Check, etc.)
Orient	U F 73176	
Full Name of Contributor		
Ross Chambes		Ad I DI VI A
Street Address		M D Y Amount 150-00
City 2	Stal te Zip Code	Form (Cash, Check, etc.)
Pickerington	O H 43147	Check
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 Hod. to I hereby affirm that each contribution was voluntarily made.		
(Signature of 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 No. 31-G."