

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>Ted Blain</u>				Registration Number, if PAC			
Street Address <u>2295 Hiawatha Park</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43211</u>	<u>0</u>	<u>7</u>	<u>03</u>	<u>06</u> 10-00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>Violet Dell Italia</u>				Registration Number, if PAC			
Street Address <u>3204 Shasta Ave.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43231</u>	<u>0</u>	<u>7</u>	<u>03</u>	<u>06</u> 25-00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>Ron Sabatino</u>				Registration Number, if PAC			
Street Address <u>3895 Stoneridge Ln.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Dublin</u>		State <u>OH</u>	Zip Code <u>43017</u>	<u>0</u>	<u>7</u>	<u>10</u>	<u>06</u> 600-00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>Sam Koon</u>				Registration Number, if PAC			
Street Address <u>141 E. Town St</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	<u>0</u>	<u>7</u>	<u>10</u>	<u>06</u> 660-00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>A.J. Myers</u>				Registration Number, if PAC			
Street Address <u>2463 Bexley Park Rd.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Bexley</u>		State <u>OH</u>	Zip Code <u>43209</u>	<u>0</u>	<u>7</u>	<u>10</u>	<u>06</u> 600-00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>A.J. Myers</u>				Registration Number, if PAC			
Street Address <u>2463 Bexley Park Rd.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Bexley</u>		State <u>OH</u>	Zip Code <u>43209</u>	<u>0</u>	<u>7</u>	<u>10</u>	<u>06</u> 200-00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>Paul Lopez</u>				Registration Number, if PAC			
Street Address <u>6321 E. Livingston Ave.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Reynoldsburg</u>		State <u>OH</u>	Zip Code <u>43068</u>	<u>0</u>	<u>7</u>	<u>10</u>	<u>06</u> 100-00
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 \$ 2,135.00