

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>						Registration Number, if PAC	
Full Name of Contributor <u>Chris Zeigler</u>				Registration Number, if PAC			
Street Address <u>1251 Belcross Dr.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<u>0</u>	<u>5</u>	<u>25</u>	<u>06</u> 250.00
City <u>New Albany</u>	State <u>OH</u>	Zip Code <u>43054</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Robert Jeffrey</u>				Registration Number, if PAC			
Street Address <u>296 Ashbourne Pl.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<u>0</u>	<u>5</u>	<u>25</u>	<u>06</u> 100.00
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43209</u>		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
				<u>0</u>	<u>5</u>	<u>25</u>	<u>06</u> 250.00
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43215</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Beresh, Friedlander, Caplan & Aronoff</u>				Registration Number, if PAC			
Street Address <u>200 Public Sq.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<u>0</u>	<u>5</u>	<u>30</u>	<u>06</u> 250.00
City <u>Cleveland</u>	State <u>OH</u>	Zip Code <u>44114</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Ed Overmyer</u>				Registration Number, if PAC			
Street Address <u>2245 North Bank Dr.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<u>0</u>	<u>6</u>	<u>02</u>	<u>06</u> 250.00
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43220</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Harley E. Randa</u>				Registration Number, if PAC			
Street Address <u>2285 Yorkshire Rd.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<u>0</u>	<u>6</u>	<u>05</u>	<u>06</u> 250.00
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43221</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>George Kortesianis</u>				Registration Number, if PAC			
Street Address <u>400 S. Fifth St.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<u>0</u>	<u>6</u>	<u>08</u>	<u>06</u> 250.00
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43215</u>		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 \$ 1,600.00