Page _	19	

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

N				
Name of Committee in Full Committee for Josep	La	Testa		
Full Name of Contributor		- 1-1		
Bill Jewell				
Street Address			M D Y Amount	
4925 Annuat Rd.	i 8. I.	Tr. O.	060206 70.0	0
Col-mbs	Sta te	Zip Code 43228	Form (Cash, Check, etc.)	
Full Name of Contributor				<i>i</i>
Street Address	·· ····		M D Y Amount	
9658 Wagnwood D-	-,		060606 35-0	o
Sally Danceski Street Address 9658 Wasonwood Dr City Pickerinston Full Name of Contributor	Sta te	Zip Code 43/47	Form (Cash, Check, etc.)	
Full Name of Contributor	L	the state of the s		
Street Address			M D Y Amount	
			Allount	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor Total of Pases 13 T	ha	19		
Total of Pages 13 To Street Address Transferred To For	m 3	II-E	M D Y Amount	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor	<u> </u>			
Street Address			M D Y Amount	
		· · · · · · · · · · · · · · · · · · ·		
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor	ļ			
·				
Street Address			M D Y Amount	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
The above are employees of a unit or department under the direct supervision an	nd control of	Joseph W. J	, who currently holds the public of	ffice
of County And for I hereby affirm that each co				
120. Charles (Signature of Treasurer or	Deputy Treas	urer)		

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."