Page	49
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Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full	······································		· · · · · ·				
Committee for Joseph W.	Testa						
Full Name of Contributor							
Lauric Ludlum Street Address					4		
			М	D Y	Amount		
1615 Dondee Ct.	,		07	2406	50-00		
City	1 1. 1	Zip Code	Form (Ca	sh, Check, etc.)			
Colombis	OH	43227	CI	reck			
Full Name of Contributor							
Michelle Click			M	ם ע	Amount		
Street Address			M	2 44 0	50,00		
5738 Blandenbrook Ln.	Sta te	Zip Code		2 4 0 6 sh, Check, etc.)	30.0		
Cahana	OH	43230	بذ ا	heck			
Full Name of Contributor		73230			N.		
Ken Perny					制。輸出的學		
Street Address			M	D Y	Amount		
170 Laurel Dr.		·	07	2406	100.00		
City	Sta te	Zip Code	Form (Ca	sh, Check, etc.)			
Pataskala	OH	43062	C	reck			
Full Name of Contributor			1 : 1				
Sharon James			1				
Street Address			M		Amount		
8682 Davington Dr.	Ct-l:	7:- C-1-		2406	50-00		
City		Zip Code 43 <i>0</i> (7	_ `_	sh, Check, etc.)			
Full Name of Contributor	OH	7001/		near			
run Maine of Contributor							
Street Address	·	 	M	D Y	Amount		
1					 		
City	Sta te	Zip Code	Form (Ca	ish, Check, etc.)			
		_			10 J. C.		
Full Name of Contributor	110						
Total of Pages 46 Thn 49							
Street Address			М	D Y	Amount		
Transferred 10 Form	31-6	<u> </u>					
City	Sta te	Zip Code	Form (Ci	ash, Check, etc.)			
The above are employees of a unit or department under the direct supervision an	nd control of	Joseph W. Tast	5	, who currently h	olds the public office		
of Carty Aditor . I hereby affirm that each contribution was voluntarily made.							
120. (Signature of Treasurer or	Deputy 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."