

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>James Whitacre</u>				Registration Number, if PAC			
Street Address <u>1260 Venetian Ct.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43230</u>	<u>0</u>	<u>9</u>	<u>16</u>	<u>05</u> 150.00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>Don Bender</u>				Registration Number, if PAC			
Street Address <u>2632 Northmant Dr.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Blacklick</u>		State <u>OH</u>	Zip Code <u>43004</u>	<u>0</u>	<u>9</u>	<u>16</u>	<u>05</u> 150.00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>Don Slane</u>				Registration Number, if PAC			
Street Address <u>261 W. Johnstown Rd.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43230</u>	<u>0</u>	<u>9</u>	<u>16</u>	<u>05</u> 2,500.00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>The Limited PAC</u>				Registration Number, if PAC <u>CP 809</u>			
Street Address <u>Three Limited Pkwy.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43230</u>	<u>0</u>	<u>9</u>	<u>16</u>	<u>05</u> 2,000.00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>Bruce Soll</u>				Registration Number, if PAC			
Street Address <u>141 S. Draxel Ave.</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>9</u>	<u>16</u>	<u>05</u> 500.00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>James Joyce</u>				Registration Number, if PAC			
Street Address <u>1335 Dublin Rd.</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>9</u>	<u>16</u>	<u>05</u> 2,000.00
Form (Cash, Check, etc.) <u>Check</u>							
Full Name of Contributor <u>Kevin Miles</u>				Registration Number, if PAC			
Street Address <u>1009 Pennsylvania Ave.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43201</u>	<u>0</u>	<u>9</u>	<u>16</u>	<u>05</u> 150.00
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 \$ 7,450.00