

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 Kime</u>				Registration Number, if PAC	
Street Address <u>2550 W. 5th Ave.</u>		Employer/Occupation/Labor Organization*		M D Y <u>07 16 07</u>	Amount <u>10.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43204</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Michael Cua</u>				Registration Number, if PAC	
Street Address <u>5066 Medallion Dr.</u>		Employer/Occupation/Labor Organization*		M D Y <u>07 16 07</u>	Amount <u>150.00</u>
City <u>Westerville</u>	State <u>OH</u>	Zip Code <u>43082</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Matt Mnich</u>				Registration Number, if PAC	
Street Address <u>7895 Silver Lake Ct.</u>		Employer/Occupation/Labor Organization*		M D Y <u>07 16 07</u>	Amount <u>250.00</u>
City <u>Westerville</u>	State <u>OH</u>	Zip Code <u>43082</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Mark Arnold</u>				Registration Number, if PAC	
Street Address <u>13435 Milnor Rd.</u>		Employer/Occupation/Labor Organization*		M D Y <u>07 18 07</u>	Amount <u>250.00</u>
City <u>Pickerington</u>	State <u>OH</u>	Zip Code <u>43147</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Charles Hill</u>				Registration Number, if PAC	
Street Address <u>800 Aldensgate Dr.</u>		Employer/Occupation/Labor Organization*		M D Y <u>07 18 07</u>	Amount <u>200.00</u>
City <u>Galloway</u>	State <u>OH</u>	Zip Code <u>43119</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>BIA PAC of Central Ohio</u>				Registration Number, if PAC <u>OH 135</u>	
Street Address <u>495 Executive Campus Dr.</u>		Employer/Occupation/Labor Organization*		M D Y <u>07 18 07</u>	Amount <u>750.00</u>
City <u>Westerville</u>	State <u>OH</u>	Zip Code <u>43082</u>		Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Ed Havenstein</u>				Registration Number, if PAC	
Street Address <u>2926 E. Mound St.</u>		Employer/Occupation/Labor Organization*		M D Y <u>07 19 07</u>	Amount <u>150.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43209</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 \$ 1,760.00