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FRANKLIN COUNTY
BOARD OF ELECTIONS

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <i>Committee for Joseph W. Testa</i>						Registration Number, if PAC				
Full Name of Candidate <i>Joseph W. Testa</i>										
Street Address <i>5412 Thornhill Ct.</i>				Office Sought <i>County Auditor</i>		District				
City <i>Grove City</i>				State <i>OH</i>		Zip Code <i>43123</i>				
Type of Report (place X to the left of report type)	<input type="checkbox"/>	Pre-Primary	<input type="checkbox"/>	Post-Primary	<input checked="" type="checkbox"/>	Pre-General	<input type="checkbox"/>	Post-General	<input type="checkbox"/>	Annual Year
	<input type="checkbox"/>	July Monthly	<input type="checkbox"/>	August Monthly	<input type="checkbox"/>	September Monthly	<input type="checkbox"/>	Termination	<input type="checkbox"/>	Semiannual
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date of Election		<i>11</i>	<i>07</i>	<i>0</i>	<i>6</i>	

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	<i>176,477.40</i>	✓
2. Total monetary contributions (From Form No. 31-A)	\$	<i>57,215.00</i>	✓
3. Total other income (From Form No. 31-A-2)	\$	<i>372.73</i>	✓
4. Total funds available (sum of lines 1, 2, 3)	\$	<i>234,065.13</i>	✓
5. Total monetary expenditures (From Form No. 31-B)	\$	<i>209,654.95</i>	✓
6. Balance on hand (line 4 minus line 5)	\$	<i>24,410.18</i>	✓
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	<i>1,612.11</i>	✓
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$		
9. Outstanding loans owed by committee (From Form No. 31-C)	\$		
10. Outstanding debts owed by committee (From Form No. 31-N)	\$		
11. Outstanding loans owed to committee (From Form No. 31-K)	\$		
12. Value of independent expenditures made (From Form No. 31-U)	\$		
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$		

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

Ross A. Chambers, Treasurer *R.A. Chambers* *10/26/06*
Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution pages *51*

Expenditure pages *11*

Other pages *23*

Total pages *85*

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full <i>Committee for Joseph W. Testa</i>							
Full Name of Contributor <i>Contributions From Form 31-E</i>						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
			0	6	2	0	6
							11,880.00
Full Name of Contributor <i>Contributions From Form 31-E</i>						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
			0	7	2	1	0
							14,195.00
Full Name of Contributor <i>Contributions From Form 31-E</i>						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
			0	8	3	0	6
							2,560.00
Full Name of Contributor <i>Contributions From Form 31-E</i>						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
			0	9	1	3	0
							18,175.00
Full Name of Contributor <i>Contributions From Form 31-E</i>						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
			0	9	2	5	0
							2,805.00
Full Name of Contributor <i>Contributions From Form 31-E</i>						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
			1	0	2	3	0
							1,650.00
Full Name of Contributor <i>Contributions From Form 31-E</i>						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
			1	0	2	5	0
							5,950.00
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	

* 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)]

