

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Committee for Joseph W. Testa</u>							
Full Name of Contributor <u>Ed O'Block</u>							
Street Address <u>5765 Stevens Dr.</u>				M <u>0</u>	D <u>9</u>	Y <u>25</u>	Amount <u>40.00</u>
City <u>Orient</u>	State <u>OH</u>	Zip Code <u>43146</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Tina Jeffries</u>							
Street Address <u>2649 Patrick Henry Ave.</u>				M <u>0</u>	D <u>9</u>	Y <u>25</u>	Amount <u>35.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43207</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Carolyn Hauser</u>							
Street Address <u>2065 Wayfaring Dr.</u>				M <u>0</u>	D <u>9</u>	Y <u>26</u>	Amount <u>70.00</u>
City <u>Reynoldsburg</u>	State <u>OH</u>	Zip Code <u>43068</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Mark Calhoun</u>							
Street Address <u>5641 Dorsey Dr.</u>				M <u>0</u>	D <u>9</u>	Y <u>26</u>	Amount <u>35.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43235</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Laurie Ludlum</u>							
Street Address <u>1615 Dundee Ct.</u>				M <u>0</u>	D <u>9</u>	Y <u>26</u>	Amount <u>35.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43227</u>		Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Michelle Click</u>							
Street Address <u>5738 Blendenbrook Ln.</u>				M <u>0</u>	D <u>9</u>	Y <u>26</u>	Amount <u>35.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43230</u>		Form (Cash, Check, etc.) <u>Check</u>			

The above are employees of a unit or department under the direct supervision and control of Joseph W. Testa, who currently holds the public office

of County Auditor. I hereby affirm that each contribution was voluntarily made.

R.A. Charles (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 form No. 31-G."