

# 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>						Registration Number, if PAC		
Full Name of Contributor <u>Roger Blair</u>				M		D	Y	Amount
Street Address <u>4670 Tensweep</u>		Employer/Occupation/Labor Organization*		0		9	0	200.00
City <u>New Albany</u>		State <u>OH</u>		Zip Code <u>43054</u>		Form (Cash, Check, etc.) <u>Check</u>		
Full Name of Contributor <u>Tiberi for Congress</u>				M		D	Y	Amount
Street Address <u>2021 E. Dublin Granville</u>		Employer/Occupation/Labor Organization*		0		9	0	500.00
City <u>Columbus</u>		State <u>OH</u>		Zip Code <u>43229</u>		Form (Cash, Check, etc.) <u>Check</u>		
Full Name of Contributor				M		D	Y	Amount
Street Address		Employer/Occupation/Labor Organization*						
City		State		Zip Code		Form (Cash, Check, etc.)		
Full Name of Contributor <u>Total Employee Contributions From Form 31-G</u>				M		D	Y	Amount
Street Address		Employer/Occupation/Labor Organization*						1,750.00
City		State		Zip Code		Form (Cash, Check, etc.)		
Full Name of Contributor				M		D	Y	Amount
Street Address		Employer/Occupation/Labor Organization*						
City		State		Zip Code		Form (Cash, Check, etc.)		
Full Name of Contributor				M		D	Y	Amount
Street Address		Employer/Occupation/Labor Organization*						
City		State		Zip Code		Form (Cash, Check, etc.)		
Full Name of Contributor				M		D	Y	Amount
Street Address		Employer/Occupation/Labor Organization*						
City		State		Zip Code		Form (Cash, Check, etc.)		

\* 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 \$ 2,450.00