

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Committee for Joseph W. Tests							
Full Name of Contributor			Registration Number, if PAC				
Nisource PAC			C00057979				
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
200 Civic Center Dr.				0	12006		1,000.00
City		State	Zip Code		Form (Cash, Check, etc.)		
Columbus		OH	43215		Check		
Full Name of Contributor							
Katherine S. LeVeque							
Street Address			Registration Number, if PAC				
50 W. Broad St.							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
50 W. Broad St.				0	12306		2,500.00
City		State	Zip Code		Form (Cash, Check, etc.)		
Columbus		OH	43215		Check		
Full Name of Contributor							
John H. McConnell							
Street Address			Registration Number, if PAC				
200 Old Wilson Bridge							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
200 Old Wilson Bridge				0	12306		1,500.00
City		State	Zip Code		Form (Cash, Check, etc.)		
Columbus		OH	43085		Check		
Full Name of Contributor							
Nelson Kohman							
Street Address			Registration Number, if PAC				
10039 Hollow Rd.							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
10039 Hollow Rd.				0	12606		400.00
City		State	Zip Code		Form (Cash, Check, etc.)		
Pataskala		OH	43062		Check		
Full Name of Contributor							
Greg Comfort							
Street Address			Registration Number, if PAC				
2275 Orandaga Dr.							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
2275 Orandaga Dr.				0	12606		400.00
City		State	Zip Code		Form (Cash, Check, etc.)		
Columbus		OH	43221		Check		
Full Name of Contributor							
Craig Bohning							
Street Address			Registration Number, if PAC				
13740 Blamer Rd.							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
13740 Blamer Rd.				0	12606		300.00
City		State	Zip Code		Form (Cash, Check, etc.)		
Johnstown		OH	43031		Check		
Full Name of Contributor							
Jeffrey Strong							
Street Address			Registration Number, if PAC				
350 Potomac Ct.							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
350 Potomac Ct.				0	12606		300.00
City		State	Zip Code		Form (Cash, Check, etc.)		
Westerville		OH	43082		Check		

\* 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 \$ 6,400.00