

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Greenhill for City Council									
Full Name of Contributor Elizabeth A Miller						Registration Number, if PAC			
Street Address 544 S Front St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43215		M 0		D 9	
						Y 1		Amount \$50.00	
Full Name of Contributor Richard C Bair						Registration Number, if PAC			
Street Address 1751 Roxbury Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43212		M 0		D 9	
						Y 1		Amount \$100.00	
Full Name of Contributor Jared M Moore						Registration Number, if PAC			
Street Address 4380 Lyon Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M 0		D 9	
						Y 1		Amount \$50.00	
Full Name of Contributor James I Prater						Registration Number, if PAC			
Street Address 2000 Malvern Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0		D 9	
						Y 1		Amount \$50.00	
Full Name of Contributor Carolyn T Casper						Registration Number, if PAC			
Street Address 2545 Northwest Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Upper Arlington		State OH		Zip Code 43221		M 0		D 9	
						Y 1		Amount \$100.00	
Full Name of Contributor Nancy A Volksen						Registration Number, if PAC			
Street Address 2754 Cranford Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0		D 9	
						Y 1		Amount \$100.00	
Full Name of Contributor Dianne P Albrecht						Registration Number, if PAC			
Street Address 3990 Newhall Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M 0		D 9	
						Y 1		Amount \$200.00	
Full Name of Contributor Noelle E Fox						Registration Number, if PAC			
Street Address 2396 Middlesex Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M 0		D 9	
						Y 1		Amount \$50.00	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, 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)]

Page Total **\$700.00**