

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Greenhill for City Council									
Full Name of Contributor T D Dewey						Registration Number, if PAC			
Street Address 2951 Halstead Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0	D 7	Y 1	Amount \$25.00
Full Name of Contributor Ila R Mincy						Registration Number, if PAC			
Street Address 4063 Longhill Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M 0	D 7	Y 1	Amount \$100.00
Full Name of Contributor Sharon I Denehy						Registration Number, if PAC			
Street Address 2268 Abington Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0	D 7	Y 1	Amount \$100.00
Full Name of Contributor Wayne H Wookey						Registration Number, if PAC			
Street Address 1926 Milden Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0	D 7	Y 1	Amount \$100.00
Full Name of Contributor Carol C Carothers						Registration Number, if PAC			
Street Address 1612 Cardiff Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0	D 7	Y 1	Amount \$50.00
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 7	Y 1	Amount \$150.00
Full Name of Contributor Roger 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 7	Y 1	Amount \$150.00
Full Name of Contributor Thomas L Long						Registration Number, if PAC			
Street Address 2565 Leeds Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0	D 7	Y 1	Amount \$250.00

* 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 **\$925.00**