Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Greenhill for City Council					
Full Name of Contributor Susan Dunlap Potts			Registration Number, if PAC		
Street Address 1140 Millcreek Ln	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M D Y 0 7 2 4 1 7	Amount \$150.00	
Full Name of Contributor Mark E Boesch Registration Number, if PAC					
Street Address 2270 Walhaven Ct	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M D Y 7 2 4 1 7	Amount \$100.00	
Full Name of Contributor Mark S Wenger	R			Registration Number, if PAC	
Street Address 4905 Pleasant Valley Dr	Employer/Occu	pation/Labor Organization •		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M D Y 2 4 1 7	Amount \$50.00	
Full Name of Contributor PhilGlandon	ilGlandon			AC	
Street Address 2117 Elgin Rd		pation/Labor Organization		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	0 7 2 4 1 7	Amount \$250.00	
Full Name of Contributor Registration Number, if PAC William M Dimascio					
Street Address 3509 Rue De Fleur	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	$\begin{bmatrix} M & D & Y \\ 0 & 7 & 2 & 4 & 1 & 7 \end{bmatrix}$	Amount \$250.00	
Full Name of Contributor Louise Dimascio Registration Number, if PAC					
Street Address 3509 Rue De Fleur	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	0 7 2 4 1 7	\$250.00	
Full Name of Contributor James M Hamilton Registration Number, if PAC					
Street Address 2810 Swansea Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus Full Name of Contributor	State OH	Zip Code 43221	0 7 2 4 1 7	\$50.00	
Elaine S Buck					
4146 Clairmont Rd		pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	0 7 2 4 1 7	Amount \$100.00	

^{*} 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)]