Statement of Contributions Received



Prescribed by Secretary of State 03/05

Name of Committee in Full Greenhill for City Council					
Full Name of Contributor Ellen Erlanger			Registration Number, if I	PAC	
Street Address 1930 Concord Rd	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43212	0 7 2 7 1 6	Amount \$25.00	
Full Name of Contributor John Cleland			Registration Number, if I	PAC	
Street Address 2319 Arlington Ave	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	0 7 2 7 1 6	Amount \$25.00	
Full Name of Contributor Jane Leach			Registration Number, if PAC		
Street Address 1236 Kenbrook Hills Dr	Employer/Occu	upation/Labor Organization*	•	Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	0 7 2 7 1 6	Amount \$250.00	
Full Name of Contributor Re Timothy Duffey			Registration Number, if F	PAC	
Street Address 2431 Onandaga Dr	Employer/Occur	pation/Labor Organization*		Form (Cash, Check, etc.): Check	
City Upper Arlington	State OH	Zip Code 43221	0 7 2 7 1 6	Amount \$100.00	
Full Name of Contributor William Seibert			Registration Number, if F	'AC	
Street Address 3877 Lakedale Dr	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hillard	State OH	Zip Code 43026	0 7 2 7 1 6	Amount \$100.00	
Full Name of Contributor JoAnn Sinclair			Registration Number, if F	Registration Number, if PAC	
Street Address 3022 Leeds Rd	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	0 7 2 7 1 6	Amount \$25.00	
Full Name of Contributor Bruce Peterson			Registration Number, if F	AC	
Street Address 3410 London Court Dr	Employer/Occur	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M D Y 1 6	Amount \$100.00	
Full Name of Contributor Priscilla Meeks			Registration Number, if P	AC	
Street Address 2611 Edington Rd	Employer/Occur	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M D Y 0 7 1 6	Amount \$50.00	

Page Total \$675.00

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)]