## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Greenhill for City Council					<del></del>	
Full Name of Contributor			Registra	tion Nun	ber, if P	AC
thomas C westfall						
Street Address 789 Dennison Ave	Employer/Occupat	ion/Labor Organization*				Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	м 0 9	D 1 1	1 7	Amount \$200.00
Full Name of Contributor Registration Number, if P.						AC
Linda beckett						
Street Address	Employer/Occupat	ion/Labor Organization		·		Form (Cash, Check, etc.)
150 W Beechwold Blvd	' ' '	v				Check
City	State	Zip Code	M	D	Y	Amount
Columbus	ОН	43214	0 9	1 1	1 7	\$50.00
Full Name of Contributor  William A Clark  Registration Number, if PAC						
Street Address	Employer/Occupat	ion/Labor Organization	•			Form (Cash, Check, etc.)
1335 Dublin Rd, Ste 40A						Check
City Columbus	State OH	Zip Code 43215	0 <sup>M</sup> 9	1 1	1 7	Amount \$200.00
Full Name of Contributor Registration Number, if PAC						AC
Street Address	Employer/Occupat	ion/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)
City	State OH	Zip Code	M	D	Y	Amount
Full Name of Contributor	1 0.	L.,	Registra	tion Num	ber, if P	AC
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State OH	Zip Code	М	D	Y	Amount
Full Name of Contributor Registration Number, if F					ber, if P	AC
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	Di	Y	Amount
	OH	,				
Full Name of Contributor Registration Number, if I					ber, if P	AC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount
	ОН					
Full Name of Contributor Registration Number, if P					AC .	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount

Page Total \$450.00

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)]