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 Mary Laird Duchi			Registration Number, if P	AC
Street Address 2744 Coventry Rd	Employer/Occu	pation/Labor Organization*	<u>.</u>	Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	M D Y 0 9 1 1 1 7	Amount \$50.00
Full Name of Contributor David M McCurdy Registration Number, if PAC				
Street Address 2400 Tremont Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	0 9 1 1 1 7	Amount \$250.00
Full Name of Contributor Georgia B Hauser			Registration Number, if PAC	
Street Address 2320 Tremont Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43220	0 9 1 1 1 7	Amount \$100.00
Full Name of Contributor Registration Number, if PAC Whitney T Logan				AC
Street Address 4161 Kenny Rd	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43220	M D Y 0 9 1 1 1 7	Amount \$100.00
Full Name of Contributor Registration Number, if PAC William James O'Brien				
Street Address 26 1/2 Island Ave	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Buckhannon	State WV	Zip Code 26201	0 9 1 1 1 7	Amount \$50.00
Full Name of Contributor Registration Number, if PAC Jenny Lou renkert				
Street Address 2160 McCoy Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43220	0 9 1 1 1 7	Amount \$25.00
Full Name of Contributor John Andrew Mills			Registration Number, if F	PAC
Street Address 2563 Berwyn Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	M D Y 0 9 1 1 1 7	Amount \$250.00
Full Name of Contributor Marilyn W Pritchett			Registration Number, if I	PAC
Street Address 4185 Chadbourne Dr	Employer/Occa	apation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43220	M D Y 0 9 1 1 1 7	Amount \$50.00

Page Total \$875.00

^{*} 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)]