



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Greenhill for City Council				
Full Name of Contributor Allison McPherson			Registration Number, if PAC	
Street Address 2899 Eastcleft Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/09/2017	Amount 25.00
Full Name of Contributor John Schuster			Registration Number, if PAC	
Street Address 2261 Hedgerow Rd, Unit H		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Columbus	State OH	Zip Code 43220	Date (MM/DD/YYYY) 10/12/2017	Amount 40.00
Full Name of Contributor Adam Wagenbach			Registration Number, if PAC	
Street Address 2416 Southway Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/16/2017	Amount 50.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]