

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Greenhill for City Council						
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 0	D 9	Y 0 4 1 3	Amount \$200.00
Full Name of Contributor Linda L. Cummins				Registration Number, if PAC		
Street Address 4236 Bibury Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 0 4 1 3	Amount \$25.00
Full Name of Contributor Robert M. Arkin				Registration Number, if PAC		
Street Address 2131 Cheshire Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 0 4 1 3	Amount \$250.00
Full Name of Contributor Barbara McAdam Muller				Registration Number, if PAC		
Street Address 4171 Clairmont Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 0 4 1 3	Amount \$50.00
Full Name of Contributor Julia Armstrong				Registration Number, if PAC		
Street Address 1225 Dublin Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 0 4 1 3	Amount \$50.00
Full Name of Contributor Cheryl V. Kriska				Registration Number, if PAC		
Street Address 3758 Surrey Hill Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43220	M 0	D 9	Y 0 4 1 3	Amount \$100.00
Full Name of Contributor Bruce A. Peterson				Registration Number, if PAC		
Street Address 2633 York Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 0 4 1 3	Amount \$100.00
Full Name of Contributor William Lee Obrien				Registration Number, if PAC		
Street Address 99 S. Kanawha St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Buckhannon	State WV	Zip Code 26201	M 0	D 9	Y 0 4 1 3	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)]

Page Total **\$875.00**