

**Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Greenhill for City Council</b>											
Full Name of Contributor <b>Julie D Vannatta</b>						Registration Number, if PAC					
Street Address <b>2170 Waltham Rd</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>				
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43221</b>		M <b>0</b>		D <b>7</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Jeff Reinhardt</b>						Registration Number, if PAC					
Street Address <b>2630 Coventry Rd</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>				
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43221</b>		M <b>0</b>		D <b>7</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Shirley Evans Wing</b>						Registration Number, if PAC					
Street Address <b>2625 Clairmont Ct</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>				
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43220</b>		M <b>0</b>		D <b>7</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>William T Mead</b>						Registration Number, if PAC					
Street Address <b>2257 Abington Rd</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>				
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43221</b>		M <b>0</b>		D <b>7</b>	Y <b>1</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>John Adams</b>						Registration Number, if PAC					
Street Address <b>2310 Dorset Rd</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>				
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43221</b>		M <b>0</b>		D <b>7</b>	Y <b>1</b>	Amount <b>\$250.00</b>
Full Name of Contributor						Registration Number, if PAC					
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City			State <b>OH</b>		Zip Code		M		D	Y	Amount
Full Name of Contributor						Registration Number, if PAC					
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City			State <b>OH</b>		Zip Code		M		D	Y	Amount
Full Name of Contributor						Registration Number, if PAC					
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City			State <b>OH</b>		Zip Code		M		D	Y	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)]

Page Total **\$525.00**