

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Greenhill for City Council						
Full Name of Contributor Jodi A. Stechschulte				Registration Number, if PAC		
Street Address 1200 Brittany Ln.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 7	Y 3	Amount \$50.00
Full Name of Contributor Franklin E. Kass				Registration Number, if PAC		
Street Address 150 E. Broad St., Suite 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 7	Y 3	Amount \$100.00
Full Name of Contributor Edward F. Seidel, Jr.				Registration Number, if PAC		
Street Address 4660 Stonehaven Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 7	Y 3	Amount \$100.00
Full Name of Contributor Patricia A. Hosket				Registration Number, if PAC		
Street Address 4721 Bayford Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 7	Y 3	Amount \$100.00
Full Name of Contributor John B. Patton				Registration Number, if PAC		
Street Address 4766 Riverside Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 7	Y 3	Amount \$250.00
Full Name of Contributor Carolyn Patterson				Registration Number, if PAC		
Street Address 2160 Cambridge Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 7	Y 3	Amount \$100.00
Full Name of Contributor Jane K. Stone				Registration Number, if PAC		
Street Address 2240 W. Lane Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 7	Y 3	Amount \$50.00
Full Name of Contributor Jeffrey A. Stevenson				Registration Number, if PAC		
Street Address 1817 Lynnhaven Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 7	Y 3	Amount \$50.00

* 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 **\$800.00**