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Statement of Contributions Received

Form 31-A

ORC 3517 10

Full Name of Committee			· · · · · · · · · · · · · · · · · · ·		
Greenhill for City Council					
Full Name of Contributor				Registration Number	er, if PAC
Patrick J McGonagle					
Street Address	Employ	yer/Occupation/Labo	or Organization*		Form (Cash, Check, etc.)
3832 Woodbridge Rd				!	
City	State	Zip Code	Date (MM/DD	D/YYYY)	Amount
Columbus	ОН	43220		10/17/2017	150.00
Full Name of Contributor		<u>,</u>		Registration Number	er, if PAC
Street Address	Employ	yer/Occupation/Labo	or Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD	DYYYY)	Amount
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Full Name of Contributor				Registration Number	er, if PAC
				l	
Street Address	Employ	yer/Occupation/Labo	or Organization*	Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DD		Amount
	он			!	
Full Name of Contributor		<u></u>		Registration Number	er, if PAC
Street Address	Employ	ver/Occupation/Labor Organization* Form (Cash, Check, etc.)			Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD	20000	Amount
City	OH	alp out	Date (minus 2 _	WY 111)	Amount
Full Name of Contributor	<u> </u>			Registration Number	er, if PAC
Street Address	Employ	yer/Occupation/Labor Organization* Form (Cash, Check, etc.)			Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD	DMYYY)	Amount
	ОН	-			

*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 150.00	
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