### Local Elections (Disclosure of Donation and Expenditure) Act 1999

## **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. General Information					
Name of Member	FINOLA ARMSTRONG MCGUIRE				
Address for correspondence					
-	10 MAIN ST CKON SHN				
Telephone number					
	086 3169754				
Email					
	Farmstrong@ Lectum co co.ie				
Fax number					
Political party, if any					
onucai party, ii airy	Fine Gael.				
Local authority	,				
	Leikein				
Local electoral area					
	CR ON SHANNON				

#### 2. Donations

Did you receive any single	e donation exceedir	ng €600 in value,	or donations from	m the same person
exceeding €600 in aggreg	ate value, between	1 January 2020	and 31 Decembe	r 2020.

exceeding €600 in aggregate	value, betwee	n 1 January 2020 and 31	December 2020.
Please tick ( $$ ) one box only:	Yes	No 🔽	A
		<b>\</b>	COUNTY COUNTY

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the person who issued the receipt
						9.0

 <sup>1</sup> For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc.

I (name) Finals Armstron McGundo solemnly and sincerely declare that the above statement is, to

the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed Funds Armshay McGwie  Declared before me for oaths] [peace commissioner] [practicing solicitor] by Final Almshar Market [name of
local authority member]
who is personally known to me,
or
who is identified to me by who is personally known to me
or ·
whose identity has been established to me before the taking of this Declaration by the production to me of passport no [passport number] issued on [date of issue] by the authorities of [issuing state], which is an authority recognised by the Irish Government or national identity card no [identity card number] issued on [date of issue] by the authorities of [issuing state] which is an EU Member State, the Swiss Confederation or a Contracting Party to the EEA Agreement or (document equivalent to a passport) [passport number] issued on [date of issue] by the authorities of [issuing state] which is an authority recognised by the Irish Government or refugee travel document no [document number] issued on [date
refugee travel document no[document number] issued on [date of issue] by the Minister for Justice, Equality and Defence
or travel document (other than refugee travel document)[document no.] issued on[date of issue] by the Minister for Justice, Equality and Defence.
This 29 day of Aw + 2021 [date]  [signature of witness]  [place of signature]  ENDA McGLOIN M.C.C.  Peace Commissioner  High Street  Drumshanbo  Co. Leitrim  071-96-9819

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. General Information			
Name of Member	BRENDAN BARRY		
Address for correspondence	NO.2 HILLCREST Grove		
	DAUMSHANBO CO. LEITRIM		
Telephone number	087 6335513		
Email	brendon.barry 1@yahoo.com		
Fax number			
Political party, if any	SÍNN FÉIN		
Local authority	LEITRIM		
Local electoral area	BOLLINAMORE MUNICIPAL AREA		

#### 2. Donations

Did you receive any single donatior	າ exceeding €600 in value,	or donations from the same person
exceeding €600 in aggregate value,	, between 1 January 2020	and 31 December 2020.

exceeding 6000 in aggregate	value, betwee	ii i January 2020 and	131 December 2020.
Please tick ( $$ ) one box only:	Yes	No 🗸	CORPUI ATÉ SERVICES
			SAME STANICES
			2 8 JAN 2021
			LEITRIM COUNTY COUNCIL

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
						į

 <sup>1</sup> For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc.

(name) BREVORN BARRY do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed brenden Boury
Declared before me <u>FERGAL MC PARTLAND</u> [name in capitals] a [ <del>notary public</del> ]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by BRENDAN BARRY [name of
local authority member]
who is personally known to me,
or
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
At THE SQUARE, DRUMSHANBO [place of signature] This 28th day of JANUARY 2021 [date]
Fergal Mc Partland  Feace Commissioner  TEL: 071-964/848

Please note that a witness  $\underline{\text{must}}$  belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. Ge	eneral Information
Name of Member	MARY BOHAN
Address for correspondence	MARY BOHAN DRUMKEERAN Co. Leitrim
Telephone number	087 2389348
Email	
Fax number	Comarybohan @ gmail. Com
Political party, if any	Figure FAIL
Local authority	LGTRIM G. G.
Local electoral area	FIANNA FAIL  LETRIM G. G.  Manorchameton
	2. Donations
Did you receive any single donation exceeding €600 in aggregate value, bet	ceeding €600 in value, or donation from the same person ween 1 January 2020 and 31 December 2020.
Please tick (√) one box only: Yes	Y COUNCIL No D

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
						j
		y X				

<sup>1</sup> For example, cash/cheque, use of property, services, etc.
2 For example, family member, friend, company, political party, etc.

I (name) Maky Boham do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed Many Bohan
Declared before me PATRICK PC [name in capitals] a [notary public]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by [name of
local authority member]
who is personally known to me,
or
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
At Drimkeral Coletrin [place of signature]  This 16 day of 3 ANUARY 2021 [date]  PATRICK O'ROURKE  PEACE COMMISSIONER  Killahurk, Carrigallen, Co. Leitrim  T.049 4339658 M.: 087 2930415

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

[signature of witness]

## Local Elections (Disclosure of Donation and Expenditure) Act 1999

#### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

Kreine grand 1	. General Information
THE TOTAL CONTRACT	
Name of Member	FRANK DEERN
Address for correspondence	, , , , , , , , , , , , , , , , , , ,
	DEDOMNELLY, FIVE MILE BONERNE LE LEITRIM
Telephone number	
	087 6360133
Email	
	frankdolan fg @ gmail. Com
Fax number	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Political party, if any	
	FINE SPEL
Local authority	•
	LEITRIM Co Co
Local electoral area	
	MANOR HAMILTON
	2. Donations
Did you receive any single donation exceeding €600 in aggregate value,	exceeding €600 in value, or donations from the same persobetween 1 January 2020 and 31 December 2020.
Please tick (√) one box only: Yes	No CORPORATE SERVICES
	1 9 JAN 2021

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4)  Description  of Donor <sup>2</sup>	(5) The date on which the donation was received	(6)  If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
			ja.			
					87 1	

FORMEL SILVE SUP

 <sup>1</sup> For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc.

(name) KRANK DOLAM do solemnly and sincer	rely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and	that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration consciention	ously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.	
Signed Jame Ole	
Declared before me	[name in capitals] a [notary public]
local authority member]	
who is personally known to me,	
or	to the second leading to the second to the second
who is identified to me by	_ wno is personally known to me
or	
whose identity has been established to me before the taking of this Declara passport no [passport number] issued on authorities of [issuing state], which is an autor	ation by the production to me of [date of issue] by the thority recognised by the Irish Government
national identity card no	er] issued on [date of issue] ch is an EU Member State, the Swiss
Aliens Passport no(document equivalent =(date of issue) by the authorities ofauthority recognised by the Irish Government	to a passport) [passport number] issued on [issuing state] which is an
or	
refugee travel document no[document number] of issue] by the Minister for Justice, Equality and Defence	
travel document (other than refugee travel document)[date of issue] by the Minister for Justice, Equalit	[document no.] issued on y and Defence.
At	
This 18 day of MUARY 2021 [date]	TO STORM CC
Tueler les Glain PC	ENDA McGLOIN M.C.C Peace Commissioner High Street
[signature of witness]	Orumshanbo Co. Leitrim
Please note that a witness <u>must</u> belong to one of the following cate Public / Peace Commissioner / Practicing Solicitor.	071-9640810 egories: Commissioner for Oaths / Notary

#### **PENALTIES**

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. Ge	eneral information
Name of Member	GERRY DOLAN
Address for correspondence	CORNASHAM SOGUE DBO
Telephone number	0363471865
Email	
Fax number	
Political party, if any	NP
Local authority	LEITRUM CO CO
Local electoral area	LELTRUM CO CO BALLINAMORE
	2. Donations
	ceeding €600 in value, or donations from the same person ween 1 January 2020 and 31 December 2020.
Please tick (√) one box only: Yes	No C

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
	-					
342 3		a:			in the second	-

For example, cash/cheque, use of property, services, etc.
 For example, family member, friend, company, political party, etc.

(name) Cary Dohan do solemnly and sincer	
the best of my knowledge and belief, correct in every material respect and t	
be satisfied as to its accuracy. I make this solemn declaration conscientio	usly believing the same to be true and by
virtue of the Statutory Declarations Act 1938.	
Signed Gerre Dolon	
Declared before me TABRIEL OX	[name in capitals] a [notary public]
[commissioner for eaths] [peace commissioner] [practicing solicitor] by	GERRY DOLAY [name of
local authority member]	
who is personally known to me,	
or	
who is identified to me by	_ who is personally known to me
or	
whose identity has been established to me before the taking of this Declara passport no [passport number] issued on authorities of [issuing state], which is an authorities of [issuing state], which is an authorities of [issuing state] which confederation or a Contracting Party to the EEA Agreement or [date of issue] by the authorities of [document equivalent to [date of issue] by the authorities of authority recognised by the Irish Government or refugee travel document no [document number] if of issue] by the Minister for Justice, Equality and Defence or travel document (other than refugee travel document) [date of issue] by the Minister for Justice, Equality	[date of issue] by the hority recognised by the Irish Government of issue] issued on [date of issue] the is an EU Member State, the Swiss to a passport) [passport number] issued on [issuing state] which is an [date of issue] issued on [date of issue]
FARN LEITI	BRIEL COX CE COMMISSIONER NAGH RIM P.O. RICK-ON-SHANNON

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

## Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1.	. General Information
Name of Member	CAILLIAN ELLIS
Address for correspondence	CHILDININ LAZIS
	FENACH BALLINAMORE
Telephone number	
Email	087 6992161
Email	
Fax number	ELLISCHILL MAN @ CHAIL " COW.
Political party, if any	
	FIANNA FAIL
Local authority	
	LEITRIM
Local electoral area	
	BALLINAMORE
	2. Donations
Did you receive any single donation exceeding €600 in aggregate value,	n exceeding €600 in value, or donations from the same person, between 1 January 2020 and 31 December 2020.
Please tick ( $$ ) one box only: Yes	CORPURATE SERVICES
	2 8 JAN 2021

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4)  Description  of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
	-					

 <sup>1</sup> For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc. 

I (name) CHILLIAN ELLIS do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed Calle Ellin
Declared before me Tolundo Pouls PC [name in capitals] a [notary public]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by
local authority member]
who is personally known to me,
or
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no [passport number] issued on [date of issue] by the authorities of [issuing state], which is an authority recognised by the Irish Government or [identity card number] issued on [date of issue] by the authorities of [issuing state] which is an EU Member State, the Swiss Confederation or a Contracting Party to the EEA Agreement
or Aliens Passport no(document equivalent to a passport) [passport number] issued on[date of issue] by the authorities of[issuing state] which is an authority recognised by the Irish Government
or refugee travel document no[document number] issued on[date of issue] by the Minister for Justice, Equality and Defence
or travel document (other than refugee travel document)[document no.] issued on[date of issue] by the Minister for Justice, Equality and Defence.
At Laugh Ca feet [place of signature]
This 26 day of 3AN 202 [date]
PEACE COMMISSIONER
PLACE COMMISSION OF COLUMN T.049 4339658 M. 087 2930415
[signature of witness]

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

torie a seedan 1.	General Information
restation in the control of the cont	
Name of Member	PADRAIG FALLON
Address for correspondence	PAORAIG FALLON  SMEENT DRIEMHETERAN  CO GETTRIM
Telephone number	0872808925
Email	padrais fallons F. @g mail. com
Fax number	
Political party, if any	Sinn Fein
Local authority	1 6 1 10/14
Local electoral area	MANORHAMILTON
	2. Donations
	exceeding €600 in value, or donations from the same person etween 1 January 2020 and 31 December 2020.
Please tick ( $$ ) one box only: Yes	□ No □

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
·						

 <sup>1</sup> For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc.

I (name) Ladrau talou do solemnly and sincer	rely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and	
be satisfied as to its accuracy. I make this solemn declaration conscientio	ously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.	
Signed Padrais Fuller	
Declared before me Mary Boyan	[name in capitals] a [notary public]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by	
local authority member]	
who is personally known to me,	
or	
who is identified to me by	_ who is personally known to me
or	
whose identity has been established to me before the taking of this Declara passport no	[date of issue] by the hority recognised by the Irish Government  r] issued on [date of issue] ch is an EU Member State, the Swiss to a passport) [passport number] issued on [issuing state] which is an [date [document no.] issued on [document no.]
At Mary Bola R [place of signature] This 30 day of January 202] [date]	
Many Dohan	
[signature of witness]	

Please note that a witness  $\underline{\text{must}}$  belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### PENALTIES

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. General Information				
Name of Member	PADDY FARRECL			
Address for correspondence	BALLINWING; LEITRIM PO CK-ON-SHANNON, CO LEITRIM			
Telephone number	087 1369719			
Email	PADDY FARRELLO LETTRIN CO.Co. 16			
Fax number				
Political party, if any	FIANNA FAIL			
Local authority	LEITRIM CO-CO			
Local electoral area	CK-ON-SHANNON			

	2. Do	onations	
Did you receive any single donate exceeding €600 in aggregate val	tion exceeding ue, between 1	€600 in value, or donation	ons from the same person cember 2020
Please tick (√) one box only: Y	es 🗌	No U	A COUNTY COUNC!

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
						J

<sup>1</sup> For example, cash/cheque, use of property, services, etc.
2 For example, family member, friend, company, political party, etc.

(name) Falhor do solemnly and sincerely declare that the above statement is, to
(name) do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed Padoly Furnell
Declared before me
[commissioner for oaths] [peace commissioner] [practicing solicitor] by
local authority member]
who is personally known to me,
of
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no [passport number] issued on [date of issue] by the authorities of [issuing state], which is an authority recognised by the Irish Government or [identity card number] issued on [date of issue] by the authorities of [issuing state] which is an EU Member State, the Swiss Confederation or a Contracting Party to the EEA Agreement or (document equivalent to a passport) [passport number] issued on
[date of issue] by the authorities of[issuing state] which is an authority recognised by the Irish Government
or refugee travel document no[document number] issued on[date of issue] by the Minister for Justice, Equality and Defence or
travel document (other than refugee travel document)[document no.] issued on[date of issue] by the Minister for Justice, Equality and Defence.
At Alix on Shanned Cofor M. [place of signature]
This 28 day of January 202/[date]
[signature of witness]
Please note that a witness must belong to one of the following categories: Commissioner for Oaths / Notary

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

## Local Elections (Disclosure of Donation and Expenditure) Act 1999

#### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

ne of Member ress for correspondence	CLIR DES GUCKÍAN			
ress for correspondence				
•	Derry Willow, Dromod, CARRICK-ON-SHAWNON, Co LM			
ephone number	CARRICK-ON-SHAWNON, Co LM			
•	0719638397			
ail	dgucks @ gahoo. com			
number				
tical party, if any				
al authority	LEITRIM Co. Council			
Local electoral area  CARRICK -ON - SHANNON				

#### 2. Donations

Did you receive any single donatio	n exceeding €600 in value	, or donations from the same person
exceeding €600 in aggregate value	between 1 January 2020	and 31 December 2020.

Did you receive any single do exceeding €600 in aggregate					ame persor
Please tick (√) one box only:	Yes	No V	CORP	ORATE SERV	
		l			

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4)  Description  of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
NA						
N/A				· · ·		
N/A						

<sup>1</sup> For example, cash/cheque, use of property, services, etc.

ISOS MALT,

ELL W CORNER COUNCIL

<sup>&</sup>lt;sup>2</sup> For example, family member, friend, company, political party, etc.

I (name) Cla Des Gerckiam do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed CLLR Des Guckian
Declared before me <u>WILLIAM HENRY</u> [name in capitals] a [notary public]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by Clir Des Guckian [name of
local-authority-member]
who is personally known to me,
e <del>r -</del>
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
At

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### PENALTIES

## Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. General Information				
Name of Member	FELIM GURN			
Address for correspondence	88 CREAMERY ROAD Manerhamilton Co-Leitrin			
Telephone number	0862233622			
Email	Felimguru & gmail. com.			
Fax number				
Political party, if any	INGEPENGENT			
Local authority	LEITRIM			
Local electoral area	Ma ventamilta Muncipai			

	2. [	Donations	
Did you receive any single do exceeding €600 in aggregate v			
Please tick ( $$ ) one box only:	Yes	No 🗂	AM COUNTY CS

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
K1/2	NIB	alu	AIN	ما الم	Np	N/r
				•		e e

<sup>1</sup> For example, cash/cheque, use of property, services, etc.
2 For example, family member, friend, company, political party, etc.

I (name) for do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed
Declared before me [MINA] A Mann [name in capitals] a [netary public]
[cemmissioner for oaths] [peace commissioner] [practicing solicitor] by Fig. 600 [name of
local authority member]
who is personally known to me,
or
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no [passport number] issued on [date of issue] by the authorities of [issuing state], which is an authority recognised by the Irish Government or [identity card number] issued on [date of issue] by the authorities of [issuing state] which is an EU Member State, the Swiss Confederation or a Contracting Party to the EEA Agreement or
Aliens Passport no(document equivalent to a passport) [passport number] issued on[issuing state] which is an authority recognised by the Irish Government
or refugee travel document no[document number] issued on[date of issue] by the Minister for Justice, Equality and Defence or
travel document (other than refugee travel document)[document no.] issued on[date of issue] by the Minister for Justice, Equality and Defence.
At MANNHANICAN (). ETRIN [place of signature]  This 29 day of Janua 2021 [date]
MATTHEW A. BROWN SOLICITOR
[signature of witness] MANORHAMILTON CO. LEITRIM

Please note that a witness <u>must</u> belong to one of the tenowing categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

#### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

10.70	. General Information
Name of Member	THOS MUMICAN
Address for correspondence	THOS MUMICAN HYDE ST., MOHILL
Telephone number	086 6000 530
Email	t MULLIGAN QLEITRIN CO CO
Fax number	
Political party, if any	P.G.
Local authority	F.G.
Local electoral area	CR ON SHANNON
	2. Donations
	exceeding €600 in value, or donations from the same person between 1 January 2020 and 31 December 2020.
Please tick ( $$ ) one box only: Yes	□ No □ LEITRIM COUNTY COUNCIL

29 JAN 2021

(1) alue of onation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
						3
			ga va			

<sup>1</sup> For example, cash/cheque, use of property, services, etc.
2 For example, family member, friend, company, political party, etc.

I (name) $\underline{\mathcal{H}oS}$ $\underline{\mathcal{H}o\mathcal{U}\iota\mathcal{G}A}\sim$ do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed Thos Wall of
Declared before me
[commissioner for oaths] [peace commissioner] [practicing solicitor] by Thomas Mulligan [name of
local authority member]
who is personally known to me,
or
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
At Hyde St, Mohill, Cahetrim [place of signature]  This 29 day of January 2021 [date] Gerard M. Kilrane & Co. Solicitors Mohill [signature of witness]

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

## Local Elections (Disclosure of Donation and Expenditure) Act 1999

#### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1	. General Information
Name of Member	SEAN Mc DERMOTT
Address for correspondence	SEAN Mc DERMOTT MULLAUN, MANORHAMILTON, Co. LEITRIM. F911319
Telephone number	086-8831047
Email	Seanmedermott@ leitrin coco. 1e
Fax number	N/A
Political party, if any	FINE GAEL
Local authority	(Maniaphanistan) (Titain (S)
Local electoral area	(MANORHAMILTON,) LEITEIM CO CO  SLIGO / LEITRIM  2. Donations  2. Donations  2. Donations  2. Donations  2. Donations  2. Donations  2. Donations
	2. Donations
	exceeding €600 in value, or donations from the same pers between 1 January 2020 and 31 December 2020.
Please tick ( $$ ) one box only: Yes	No X CORPORATE SERVICES
	1 9 JAN 2021

LEITRIM COUNTY COUNCIL

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
NJA	N/A	NA	N/A	N/A	N/A	NA

<sup>1</sup> For example, cash/cheque, use of property, services, etc.

<sup>&</sup>lt;sup>2</sup> For example, family member, friend, company, political party, etc.

I (name) <u>SEAN MIDERMOTT</u> do solemnly and sincerely declare that the above statement is, to the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed Some Mc Downett
Declared before me BNTHONKEENEY [name in capitals] a [notary public]
[name of
local authority member]
who is personally known to me,
or
w <del>ho is identified to me</del> -by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no [passport number] issued on [date of issue] by the authorities of [issuing state], which is an authority recognised by the Irish Government or [identity card number] issued on [date of issue] by the authorities of [issuing state] which is an EU Member State, the Swiss Confederation or a Contracting Party to the EEA Agreement or (document equivalent to a passport) [passport number] issued on [date of issue] by the authorities of [issuing state] which is an authority recognised by the Irish Government or [document number] issued on [date of issue] by the Minister for Justice, Equality and Defence
or travel document (other than refugee travel document)[document no.] issued on[date of issue] by the Minister for Justice, Equality and Defence.
At
[signature of witness]
Please note that a witness must halong to one As-th-anni Feeney view Commissioner for Oothe / Noters

# Please note that a witness must belong to one **Arthomy** wing categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitate Commissioner

#### **PENALTIES**

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

and the second second	1. General Information
Name of Member	SEAN M GOWAN
Address for correspondence	CLOONTURK OROMOD CO.LEITRIM
Telephone number	087-2318176
Email	Smegowan Dleiterimesco. 1e
Fax number	
Political party, if any	Frama Fail
Local authority	LEITRIM Co. Council.
Local electoral area	Carriel - on - Skannon

### 2. Donations

Did you receive any single donation	exceeding €600 in value	, or donations from t	the same persor
exceeding €600 in aggregate value,	between 1 January 2020	and 31 December 2	020.

exceeding #600 in aggregate	value, between	Tanuary 2020 and 31 December 2020.	
Please tick ( $$ ) one box only:	Yes	No e	
		EITRIM COUNTY COUNCIL	1
		1202 NAL 8 2	
		FCOC 1441 0 0	
		CORPORATE SERVICES	

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4)  Description  of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt

<sup>1</sup> For example, cash/cheque, use of property, services, etc.
2 For example, family member, friend, company, political party, etc.

I (name) SEAV WGOWAW do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed John Commen
Declared before me Sarris Dugae [name in capitals] a [notary public]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by Sour Mc Govern [name of
local authority member]
who is personally known to me,
or
who is identified to me by Scar Mc Course who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
At Closure 2k Doorso [place of signature]  This 78k day of JANUARY 2021 [date]
Scames Dughan
[signature of witness]

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### PENALTIES

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. General Information				
Name of Member	ENDA Me Gloria			
Address for correspondence	I GleANN AILINNE, Drumshawso Co LETRING			
Telephone number	086 - 2677637			
Email	emcgloindleitzingcoco.iè			
Fax number				
Political party, if any	Fine GAEL.			
Local authority	Leitzing Co. Councii			
Local electoral area	Rallinamore			
TRIM COUNTY COUNCIL	∄7 <sub>2. Donations</sub>			
Did you receive any single donation ex	ceeding €600 in value, or donations from the same persor ween 1 January 2020 and 31 December 2020.			
Please tick (√) one box only: Yes	Not			

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
					ALLON O'MO'S	

 <sup>1</sup> For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc.

(name) <u>ENDA We Glorn</u> do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed Kelly Word
Declared before me <u>FERGAL MC PARTLAND</u> [name in capitals] a [notary public]
[cemmissioner for oaths] [peace commissioner] [practicing solicitor] by _ENDA_HC_GLOIN_[name of
local authority member]
who is personally known to me,
or ,
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
At CARRICK ROAD, DAJASHANBO [place of signature]
This 6th day of JANUARY 2020 [date]
Teyel Mc lanttt [signature of witness]
[digitative of without]

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### PENALTIES

# Local Elections (Disclosure of Donation and Expenditure) Act 1999

# **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. G	eneral Information
STATES STATES	
Name of Member	PADDY O POURKE
Address for correspondence	CAPRICHIEN COLETRIA O49-4339658
Telephone number	
Email	PADDY O POURKE 99 B RMAILAROUR
Fax number	
Political party, if any	FIANNA FAIL
Local authority	COLE(TRILI
Local electoral area	BALLING MORE
	2. Donations
Did you receive any single donation exceeding €600 in aggregate value, bet	ceeding €600 in value, or donations from the same person ween 1 January 2020 and 31 December 2020.
Please tick ( $$ ) one box only: Yes	No LEORPORATE SERVICES
	1 8 JAN 2021

LEITRIM COUNTY COUNCIL

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4)  Description  of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
W/A	NA	MA	- N/A	NA	NA	NA
NA	N/A	NA	NA	NA	MA	N/A
MA	Na	NA	MA	NA	MA	W/A

<sup>1</sup> For example, cash/cheque, use of property, services, etc.

LOL WALLS

<sup>&</sup>lt;sup>2</sup> For example, family member, friend, company, political party, etc.

I (name) ADDYOKOURKE do solemnly and sincere	ely declare that the above statement is to
the best of my knowledge and belief, correct in every material respect and t	
be satisfied as to its accuracy. I make this solemn declaration consciention	
virtue of the Statutory Declarations Act 1938.	
Declared before me MARINOHAV	[name in capitals] a [notary public]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by _	[name of
local authority member]	
who is personally known to me,	
or	
who is identified to me by	who is personally known to me
or	
whose identity has been established to me before the taking of this Declarati passport no [passport number] issued on _ authorities of [issuing state], which is an author or [identity card number] by the authorities of [issuing state] which confederation or a Contracting Party to the EEA Agreement or	[date of issue] by the ority recognised by the Irish Government issued on [date of issue] is an EU Member State, the Swiss
Aliens Passport no(document equivalent to[date of issue] by the authorities ofauthority recognised by the Irish Government or	a passport) [passport number] issued on [issuing state] which is an
refugee travel document no[document number] is of issue] by the Minister for Justice, Equality and Defence or	
travel document (other than refugee travel document)[date of issue] by the Minister for Justice, Equality	[document no.] issued on and Defence.
At	CORPORATE SERVICES
This 12 day of Jaw 2020 [date]	1.8 JAN 2021
[signature of witness]	LEITRIM COUNTY COUNCIL

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

# **Local Elections (Disclosure of Donation and Expenditure) Act 1999**

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. General Information		
Name of Member	Ita Reynolds Flynn	
Address for correspondence	Ita Reynolds Flynn Fearglass North Monil Co. Letrim	
Telephone number		
	086-1737181	
Email		
	Itatlynn@gmail. Com.	
Fax number		
	N/A	
Political party, if any		
	Jine Gaeh	
Local authority		
	heitim County Council	
Local electoral area		
	Ballinamore Minitipul ARea	
	2. Donations	
Did you receive any single donation e exceeding €600 in aggregate value, b	exceeding €600 in value, or donations from the same persor petween 1 January 2020 and 31 Decembe 2020.	
5 <u></u> <u></u>	5	
Please tick (√) one box only: Yes	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Tiedae (ICK (1) OHE DOX OHIY. TES	DUNTY Co	
	JO AL	

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
NA	MA	NA	MA	WA	MA	WA
3						

 <sup>&</sup>lt;sup>1</sup> For example, cash/cheque, use of property, services, etc.
 <sup>2</sup> For example, family member, friend, company, political party, etc.

I (name) Ita Keynolds Flynn do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed & Ita Regulas Flyn
Declared before me GERARO M KIURANE [name in capitals] a [notary public]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by the Reynolds Flynn [name of local
authority member]
who is personally known to me,
or
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
At Myde St. Mohill, Co. Lahir [place of signature]  This 21 day of January LOU [date] Gerard M. Kilrane & Co.  Solicitors  Mohill  Co. Leitrim
[signature of witness]

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

# Local Elections (Disclosure of Donation and Expenditure) Act 1999

### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

1. 0	General Information			
Name of Member	ENDA STOMBA			
Address for correspondence	FNOA Slanson  Esta Dade - CAKKICK-ON - SLAUNDEN  CO LITTEIN			
Telephone number				
Email	086 - 322 8022 Ostonson @ Calkincoco ic			
Fax number				
Political party, if any	NONE			
Local authority	NONE			
Local electoral area	Tempoo			
	2. Donations			
Did you receive any single donation exceeding €600 in value, or donations from the same person exceeding €600 in aggregate value, between 1 January 2020 and 31 December 2020.				
Please tick ( $$ ) one box only: Yes [	□ No □			

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
,						

 <sup>1</sup> For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc.

I (name) FNDA SIUVE OU do solemnly and sincerely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and that I took all reasonable action in order to
be satisfied as to its accuracy. I make this solemn declaration conscientiously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.
Signed Signed
Declared before me
[commissioner for oaths] [peace commissioner] [practicing solicitor] by
local authority member]
who is personally known to me,
or
who is identified to me by who is personally known to me
or
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
At
Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**

### Local Elections (Disclosure of Donation and Expenditure) Act 1999

#### **Donation Statement by Member of a Local Authority**

(1 January 2020 to 31 December 2020)

To the section 1.	. General Information
Name of Member	JUSTIN WARNOCK
Address for correspondence	JUSTIN WARNOCK GURTENDARRAGH, KINLOUGH G. LEITRIN
Telephone number	0719842029
Email	1505TINWARNOCKESMAL.com
Fax number	
Political party, if any	FIANNA FAIL
Local authority	LETTRIM
Local electoral area	MANORHAMILTON

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation <sup>1</sup>	(4) Description of Donor <sup>2</sup>	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation?  If yes, provide the date on which the receipt issued and the name of the person who issued the receipt

 <sup>1</sup> For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc.

I (name) JUSTIN WARNEUR do solemnly and sincer	rely declare that the above statement is, to
the best of my knowledge and belief, correct in every material respect and	
be satisfied as to its accuracy. I make this solemn declaration consciention	ously believing the same to be true and by
virtue of the Statutory Declarations Act 1938.	
Signed Alasmook  Declared before me Many Bonson.	
Declared before me MAKY BOHBY.	[name in capitals] a [notary public]
[commissioner for oaths] [peace commissioner] [practicing solicitor] by	
local authority member]	
who is personally known to me,	
or	
who is identified to me by	_ who is personally known to me
or	
whose identity has been established to me before the taking of this Declara passport no	[date of issue] by the hority recognised by the Irish Government  r] issued on [date of issue] ch is an EU Member State, the Swiss to a passport) [passport number] issued on [issuing state] which is an [date [document no.] issued on
At Akum Keeran [place of signature]	
This 28 day of	

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

#### **PENALTIES**