

Local Elections (Disclosure of Donation and Expenditure) Act 1999

W 5 194

Donation Statement by Member of a Local Authority

(1 January 2021 to 31 December 2021)

1. General Information			
Name of Member	Amanda Smith		
Address for correspondence	units, Alderwood mais st stamules		
Telephone number	086 8097737		
Email	Councilloramandasmith egman.com		
Fax number			
Political party, if any	Independent		
Local authority	mean		
Local electoral area	Ash bowene		

2. Donations

Did you	receive an	ny single	donation e	exceedir	ng €600 in	value,	or donati	ons fron	n the sa	me
person	exceeding	€600 in	aggregate	value,	between	1 Janua	ry 2021	and 31	Decem	ber
2021?										

		_/
Please tick ($$) one box only:	Yes	No 🔽

3. Details of each Donation

(4)	(6)	(6)	/ 43	/= <u>`</u>	401	
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Value of Donation	Name and Address	Nature of	Description	The date	If the	Was a receipt
		Donation ¹	of Donor ²	on which	donation was	issued to the
(€)	Of Donor			the	requested	Donor in respect
				donation was	from the	of the donation?
				received	Donor, what is the name	If yes, provide
1				received	and postal	the date on
					and postar	which
					of the person	the receipt
					who	issued and the
					requested the	name of the
					donation	person
					donation	who issued the
						receipt
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 ¹ For example, cash/cheque, use of property, services, etc.
2 For example, family member, friend, company, political party, etc.

4. Statutory Declaration

I (name) .Amada .Smuth 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 Amende Smill
Declared before me
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 Man Sheet Doch [place of signature]
this
Daro My
[signature of witness]
Disease note that a witness must belong to one of the following estamption. Commissioner for Oaths /

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

PENALTIES

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A person who knowingly makes a false or misleading statutory declaration is liable on conviction to a fine not exceeding €3,000 or imprisonment for a term not exceeding six months or both.