# Appendix 1 – Donation Statement Form

phainle	Elections (Disclosure of Donation and Expenditure) Act 1999
0	Donation Statement by Member of a Local Authority
19 JAN 202	1 January 2021 to 31 December 2021)
NaCoulin	ne

1. Ger	neral Information	
Name of Member	EXELUS FLANCIC PARADAS	
Address for correspondence	EVELYN FLANCIS PARSONS  BEECHLANN HILL  BALLIN ASLOE HS3 PDIZ	
Telephone number	0871365793	
Email	efrancipations Palla galway coc	0.1
Fax number	efnercis/laters & comes	, (
Political party, if any		
	NON PARTY	
Local authority	GALWAY County Coucil	
Local electoral area	BALLINASLOE GAST GARWAY	

## 2. Donations

Did yo	u receive a	ny single	donation	exceedin	ng €600 in	value, o	r donation	s from	the s	ame
persor	exceeding	€600 in	aggregat	e value,	between '	1 Januar	y 2021 ar	nd 31	Dece	mber
2021.										

Please tick (√) one box only:	Yes	No 🗸
riease lick (v) one box only.	162	NO Z

### 3. Details of each Donation

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

#### 4. Statutory Declaration

I (name) EVELYN PARIONS 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. MALY JENNINGS [name in capitals] a [notary public] [commissioner for caths] [peace commissioner] [practicing solicitor] by Every public [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
or Aliens Passport no
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)
at Balliniste 6- Galling [place of signature]
this/s <sup>n</sup> day of January 3024 date]
at Stage
[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**

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.