Appendix 1 - Donation Statement Form

31 JAN 2022

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2021 to 31 December 2021)

1. Gene	eral Information
Name of Member	Cle Shelly Hertrich Quill
Address for correspondence	The Forger, OLD CHURCH STREET, ATHENRY, CO GALWAY
Telephone number	037 287 1355
Email	shelly ha @ cllr. galway coco. ie
Fax number	
Political party, if any	FIANNA FAIL
Local authority	
Local electoral area	GALWAY COUNTY COUNCIL ATHENRY DRANHORE

2. Donations

Did you receive a	ny single donation e	exceeding €600 in valu	e, or donations fro	m the same
person exceeding 2021.	g €600 in aggregate	e value, between 1 Jai	nuary 2021 and 3	1 December

Please tick (√) one box only:	Yes	No U

3. Details of each Donation

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation ¹	(4) Description of Donor ²	(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
		N	1			

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

4. Statutory Declaration
I (name) SHBILLY HEATENING QUEST 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. MARTINA KINANE [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
national identity card no
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
travel document (other than refugee travel document)
at [place of signature]
this 2 Tday of JANUARY [date] 2022
Martina Kirane

[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.