Appendix 1 - Donation Statement Form

3 1 JAN 2025

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(15 June 2024 to 31 December 2024)

1. Gen	eral Information
Name of Member	GERARD SHEEHAN
Address for correspondence	11 WILLANS AVE ONGAR BUBLIN 15
Telephone number	089 437 5144
Email	gerardfsheehan aoutu
Fax number	
Political party, if any	Aontu
Local authority	Fingal County Counci
Local electoral area	Ongar Control Control Control Mul Control
	2. Donations Signed: Date:

Did you receive any single donation exceeding €600 in value, or donations from the same person exceeding €600 in aggregate value, between 15 June 2024 and 31 December 2024?

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

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

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)
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 Officella
Declared before me. CONOR M.D. DEAUE. [name in capitals] a [notary public] [commissioner for oaths] [peace commissioner] [practicing solicitor] by
who is personally known to me,
or
who is identified to me bywho 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
Aliens Passport no
travel document (other than refugee travel document)
at 2 LATCH FOLD ROW DISY 7 Wiplace of signature]
this 22 day of VANUARY 2025 [date] Conor Murrough De ina Colmisinéir Síochána na ab rosnn Peace Commissioner
ENOTPOURS P.C. Signed Conflows
[signature of witness] Date: 22, 1, 2015

Please note that a witness <u>must</u> belong to one of the following categories: Germissioner for Gaths / 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.