Roscommon County Council Donation Statements 2019

No	Name	Date Returned
1	Cllr Valerie Byrne	27th January 2020
2	Cllr Liam Callaghan	27th January 2020
3	Cllr Ivan Connaughton	31st January 2020
4	Cllr Tom Crosby	27th January 2020
5	Cllr John Cummins	27th January 2020
6	Cllr Nigel Dineen	27th January 2020
7	Clir Laurence Fallon	28th January 2020
8	Cllr Paschal Fitzmaurice	27th January 2020
9	Cllr John Keogh	31st January 2020
10	Clir Donal Kilduff	27th January 2020
11	Clir Orla Leyden	27th January 2020
12	Cllr Marty McDermott	27th January 2020
13	Cllr Michael Mulligan	27th January 2020
14	Cllr Joe Murphy	30th January 2020
15	Cllr John Naughten	27th January 2020
16	Clir Kathleen Shanagher	27th January 2020
17	Clir Anthony Waldron	29th January 2020
18	Cllr Tony Ward	29th January 2020

Appendix 1 - Donation Statement Form OMMON CO. COUNCIL

ROSCOMMON COUNTY COUNCIL

27 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. General Information		
Name of Member	CUV. VALERIE BYANE	
Address for correspondence	CIV. WALLERIA - 7.17 12	
Telephone number	LISSUFF, ELPHIN, G. POSSONMON	
Email	086.8887897.	
	ellestere Clivbyrn & Presconamoncoce 10	
Fax number	NIL.	
Political party, if any	1016	
	NOR. PARTY.	
Local authority		
Local electoral area	RASEOMNOD C.Co	
TOTAL STATE OF THE	Boyle.	
	A	

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

Please tick ($$) one box only:	Yes	No 🛮
•		

(1)	(0)	(0)	1 (4)	(-)		
Value of	(2) Name and	(3) Nature of	(4) Description	(5)	(6)	(7)
Donation	Address			The date on which	If the	Was a receipt
(€)	Of Donor	Donation ¹	of Donor ²	the	donation was	issued to the
(-/	01 501101			donation	requested from the	Donor in respect
	}			was	Donor, what	of the donation?
1			,	received	is the name	If yes, provide
				/	and postal	the date on
			1		address	which
					of the person	the receipt
ļ					who	issued and the
					requested the	name of the
ł					donation	person
						who issued the
	<u> </u>			55		receipt
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		1				

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

	I (name) .VHL EKCE SYA (0): 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 Ochrie Byrno.
	Declared before me Way Man 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 and the second secon
	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 or
	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[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. Roscommon. [place of signature]
t	this 12.7 day of Jankars [date] 2020
	long ward PC
[.	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

Appendix 1 – Donation Statement Formscommon CO. COUNCIL ROSCOMMON COUNTY COUNCIL

27 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. Ge	eneral Information
Name of Member	LiAM CachAuttAN
Address for correspondence	
	RATHMUYLE CHSTINEFA
Telephone number	RATHMOYLE CASTLEREA 086-332583C Clldcolloglan @ Roscommoncoco
Email	CUACA Notion 10 1205 Common Coco
Fax number	C
Political party, if any	
	F. C.
Local authority	Roscommo ~ Boylt
ocal electoral area	1 -30011/10 10
	BoyLE

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

Please tick (√) one box only:	Yes	No 2
. loade tiek (1) one box only.	163	NO L

(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		Nil				C
		pt				
~		Wil				C

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

² For example, family member, friend, company, political party, etc.

I (name) Liver Callactan 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 re	easonable
action in order to be satisfied as to its accuracy. I make this solemn declaration consc	
believing the same to be true and by virtue of the Statutory Declarations Act 1938. Signed Lee College	normously.
Declared before me [May Mond PC [name in capitals] a [notary [commissioner for oaths] [peace commissioner] [practicing solicito [name of local authority member]	
who is personally known to me,	
or	53
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 product of	ion to me
passport no	the Irish[date of State, the
an authority recognised by the Irish Government .	
refugee travel document no[document number] issued on	[date
or travel document (other than refugee travel document)[document no.] on[date of issue] by the Minister for Justice, Equality and Defence	issued
at[place of signature]	
this 27day of	
this 27day of . A.M.W.M.Y[date] Level Mand P.C. [signature of witness]	
[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

Appendix 1 – Donation Statement Form ROSCOMMON COUNTY COUNCIL Local Elections (Disclosure of Donation and Expenditure) ROSCOMMON COUNCIL JOSCOMMON CO. COUNCIL Constitution Statement by Member of a Local Authority ROSCOMMON COUNCIL ROSCOMMON CO. COUNCIL ROSCOMMON COUNCIL ROSCOMMON COUNCIL ROSCOMMON COUNCIL ROS

1. General Information			
Name of Member	IVAN CONNAUGHTON		
Address for correspondence	MAIN STREET, ATHLEAGUE Co. ROSCOMMON		
Telephone number	086 8985013		
Email	allriconnaughton@roscommoncoco.ie		
Fax number	N/A		
Political party, if any	NONPARTY		
Local authority	Roscommon		
Local electoral area	ATHLONE		

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

(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
NIL						→ C
NIL						→
NIL						>

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

² For example, family member, friend, company, political party, etc.

I (name)Lvan ConnauGH7on 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
Signed — van Comanghton
Declared before me ### [name in capitals] a [notary public] [commissioner for oaths] [peace commissioner] [practicing soliciter] by #### [name of local authority member] who is personally known to me,
OF THE PROPERTY OF THE PROPERT
who is identified to me by
whose identity has been established to me before the taking of this Declaration by the production to me of passport no
travel document (other than refugee travel document)
at. ATHLEAGUE 6. POSCOMMON [place of signature] this. 3/5/day of JANUARY 20/6date] Signature of witness
Signature of witheast

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

ROSCOMMON CO. COUNCIL ROSCOMMON COUNTY COUNCIL ROSCOMMON CO. COUNCIL

27 JAN 2020

27 JAN 2020

CORPORATE OF ENVERGENCES (Disclosure of Donation and Expenditure RACKARPSERVICES

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. General Information					
Name of Member	TOM CROSRU				
Address for correspondence	TOM CROSBY BOLLY TOOHEY TARMONISARRY COROSCOMMON				
Telephone number					
Email	086-6005530				
с тан					
Fax number	CLLRTOMEROSIS 46 GMAIL				
Political party, if any	0433326021				
	No PARTY				
Local authority	Roscommon				
Local electoral area	Boyce				

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

No 1

(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
						С
	:5					
						C

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

I (name) IOM CROSRY 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 Ton Couly
Declared before me ANTIHONN ALDRON [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
passport no
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)
at APAS AN CHONTAC [place of signature]
this O.F. day of THNUTAP [date] 2020
Den le Carpa
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

Appendix 1 – Donation Statement Form ROSCOMMON CO. COUNCIL ROSCOMMON COUNTY COUNCIL

27 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) ORPORATE SERVICES

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

	21
Name of Member	JOHN CHOMMING
Address for correspondence	ABBEYTONT BOYLE CO ROSCOMMON
Telephone number	086 f234050
Email	chejeunning@roscomuon Co.Co.iE
ax number	
Political party, if any	FIANNA FAIL
ocal authority	POSEDMINON County
ocal electoral area	Boyle

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

Please tick ($$) one box only:	Yes		No	4
----------------------------------	-----	--	----	---

(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
		NIL				C
						O

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

	Was Cottal Creminant
	I (name)
	The state of the s
	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 Ludwing
	Declared before me [OW] WOULD [name in capitals] a [notary public] [semmissioner 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[passport number] issued on[date of issue] by the authorities of[issuing state], which is an authority recognised by the Irish 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
	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
ć	at Researce Come Office [place of signature]
t	his 2.7. day of[date]
?	roug word PC
ĺ	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

Appendix 1 – Donation Statement Form ROSCOMMON COUNTY COUNCIL

ROSCOMMON CO. COUNCIL

27 JAN 2020

CORPORATE SERVICES

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. Ge	eneral Information
Name of Member	Dico di con
Address for correspondence	Tubbe-key L. Balhtebbe 6 Por 6mm
Telephone number	036 2136 723.
Email	nigel dineene hot mail com
Fax number	O TOTAL TOTAL CONT
Political party, if any	NON PARTY
Local authority	Roscommon
Local electoral area	Rosamon MV

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

Please tick ($$) one box only:	Yes	No []

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation1	(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
			MLC			
						O

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

² For example, family member, friend, company, political party, etc.

	I (name) NIGEL DINEEN 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 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
	who is personally known to me,
	or ""
	who is identified to me by
	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[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)
é	at Ros 6m no Couty Could Building [place of signature]
1	this I.7day of[date] Lowy MCMC P.C signature of witness]
	long wand PC.
[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

Appendix 1 – Donation Statement Form

ROSCOMMON CO. COUNTROSCOMMON COUNTY COUNCIL	<u>L</u>	
20 JAN 2020 2 Local Elections (Disclosure of Donation and Expend	ROSCON	
CORPORATE SERVICES Donation Statement by Member of a Local Au	thority 28 JA	7671
(1 January 2019 to 31 December 2019)	CORPC	114 (A) (() () () () () ()

1. Ge	neral Information
£	
Name of Member	LAURBNIB JALLON
Address for correspondence	BALL ASA KNOCKCROSHEM Co RORCOMMS
Telephone number	086-8575512
Email	CLIRL FALLON. @ ROSCOMMON Lo Co, 18
Fax number	
Political party, if any	NONE
Local authority	Roscomma
Local electoral area	auttoro Roscomm

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 2019 and 31 December 2019?

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

	(1)	(0)	(0)	(2)			
	Value of	(2) Name and	(3) Nature of	(4) Description	(5)	(6)	(7)
	Donation	Address		Description	The date on which	If the	Was a receipt
	(€)	Of Donor	Donation ¹	of Donor ²	the	donation was requested	
	, ,			1	donation	from the	Donor in respect of the donation?
			1		was	Donor, what	or the donation?
ı]			received	is the name	If yes, provide
						and postal	the date on
-		:				address	which
1]	1		}	of the person	the receipt
				}		who requested the	issued and the
1						donation	name of the person
1						2	who issued the
-		1.5				81	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) ANR BNC2 +ALLON 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 Across Tall
Declared before me Patrick Kilduffname 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
whose identity has been established to me before the taking of this Declaration by the production to me of
passport no
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)[document no.] issued on[date of issue] by the Minister for Justice, Equality and Defence.
at Roscommu [place of signature]
at Roscommu [place of signature] this 27 day of Van [date] 2020
Patril Well- If PC

[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

Appendix 1 – Donation Statement Form ROSCOMMON CO. COUNCIL ROSCOMMON COUNTY COUNCIL

27 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) ORED 1999 SERVICES

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. Ge	eneral Information	
Name of Member	PASCHAL FITZMAURICE	
Address for correspondence	BALLINDRIMLEY CASTLEREA	
Telephone number	087 2299980	
Email	poschal fitzmanne @6 mai	(on
Fax number		
Political party, if any	Flanne Fail	_
Local authority	Roscommon	
Local electoral area	Roscommon LEA	

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 2019 and 31 December 2019?

Please tick ($$) one box only:	Yes	No D

(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
						C
			2			
						C

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

	I (name) PASCHAL FITZMAURO 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
	Declared before me. Mad PC [name in capitals] a [notary public] [commissioner for oaths] [peace commissioner] [practicing solicitor] by
	who is personally known to me,
	or E
	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
ć	at ARAS AN (HONTATE ROSCOMMON [place of signature]
	this. 2.7. day of MMMM. [date] 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

Appendix 1 – Donation Statement Form ROSCOMMON COUNTY COUNCIL

ROSCOMMON CO. COUNCIL

3 1 JAN 2020

CORPORATE SERVICES

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. Ge	neral Information	
Name of Member	CURJOHN KEOGH.	
Address for correspondence	ROSE COTTACE CLOSNOONNA, BEALNAMILLE ATHLONE, CO. ROSCOMMO	CA
Telephone number	2876440534	N
Email	CUIJKeogh@roscommoncoc	CO. 1
Fax number	NIA	
Political party, if any	FANNA FAIL	
Local authority	Rosamural Co. Co.	
Local electoral area	ATHLONG MUNICIPAL DISTRICT	

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

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

(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	A-	NIL				

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

I (name) FOHN ICEOCH 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 Dlun A Kerk
Declared before me LARA HAYDEN [name in capitals] a [netary public] [commissioner for oaths] [peace commissioner] [practicing solicitor] by
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[document number] issued on[date of issue] by the Minister for Justice, Equality and Defence
travel document (other than refugee travel document)[document_no.] issued on[date_of_issue] by the Minister for Justice, Equality and Defence.
at ATHEONE, CO. WESTMENT [place of signature] this 31 day of JANUARY [date 020
this. day of JAN WARY [date] 0'20
(- gen -
[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

Appendix 1 – Donation Statement Form

ROSCOMMON COUNTY COUNCIL

27 JAN 2020

CORPORATE SERVICES

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. Ge	neral Information
Name of Member	
	DONAL KILDUFF
Address for correspondence	GLANOVER ATHLONE CO ROSCOMMON
	Co Roscommon
Telephone number	
<u> </u>	0868579459
Email	
	Cllrdrild utf@hoscommoncoco.
Fax number	
Political party, if any	
	Inderendent Non Party
Local authority	
	Roscommon Co Co
Local electoral area	
	ATHLONE Munused area

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 2019 and 31 December 2019?

Please tick $()$ one box only: Yes		No 🕝
------------------------------------	--	------

(1)	(2)	(3)	(4)	(5)	(6)	
Value of	Name and	Nature of	Description	The date	(6) If the	(7) Was a receipt
Donation	Address	Donation ¹	of Donor ²	on which	donation was	issued to the
(€)	Of Donor			the	requested	Donor in respect
				donation was	from the Donor, what	of the donation?
			J	received	is the name	If yes, provide
]	and postal	the date on
			1		address	which
			1	}	of the person who	the receipt issued and the
					requested the	name of the
		ĺ			donation	person
		- 8		!		who issued the receipt
						C
			ĺ	į		
}		, ,	and the same of th	ļ		
		1.6				
					ĺ	
		[}	
	İ				ĺ	

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

² For example, family member, friend, company, political party, etc.

I (name) DoJAL KILDUFF 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.: [MULLA P.C
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[document number] issued on[date of issue] by the Minister for Justice, Equality and Defence
or travel document (other than refugee travel document)
at[place of signature]
this. 2.7. day of January [date]
Tony wand P.C.
signature of witness]

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

PENALTIES

Appendix 1 - Donation Statement Formomon CO. COUNCIL ROSCOMMON COUNTY COUNCIL 27 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. General Information				
75				
Name of Member	Orla Leyden			
Address for correspondence	Castlewate, Roslonnon			
Telephone number				
	087 2819918			
Email	,			
	orlaley den @ gma.l.com			
Fax number				
Political party, if any	France Fáil			
Local authority				
	Roscommon County Coural			
Local electoral area	Roslommon LEA			

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

	(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
:		Die Kr					С
			N				Ш
							C

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

² For example, family member, friend, company, political party, etc.

I (name) Orla Leyden 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 Aug d
Declared before me
who is personally known to me,
or
who is identified to me by
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[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 ap authority recognised by the Irish Government
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 Ans an Chontae [place of signature]
this. 27. day of . A. a. a. a. [date]
long pland PC
[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

Appendix 1 – Donation Statement Form

ROSCOMMON COUNTY COUNCIROSCOMMON CO. COUNCI

27 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) Act 1999
CORPORATE SERVICES

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. Ge	eneral Information
Name of Member	Klantyst (2004)
Address for correspondence	Sh Oproces Nosconeal
Telephone number	087 346 60 64
Email	340 60 64
Fax number	
Political party, if any	FF Figure Fail
ocal authority	The state of the s
Local electoral area	Min Rotenman

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

Please tick (√) one box only:	Yes	No U
ricase tick (v) one box only.	165	140

(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
Nic	Nic	Mi	Wi	N	NX	W39

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

² For example, family member, friend, company, political party, etc.

I (name) 1 (name) to 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.
believing the same to be tide and by virtue of the Statutory Declarations Act 1938.
Signed Control of the signed
Declared before me ANTHONY NALLS [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 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(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
travel document (other than refugee travel document)[document no.] issued on[date of issue] by the Minister for Justice, Equality and Defence.
at ARAS AN CHONTAE [place of signature] this 27 day of JANUARY [date] 2 = 2 = 0
this 27 day of JAN LARY [date] 200
In Clean.
[signature of witness]
· · · · · · · · · · · · · · · · · · ·

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

Appendix 1 - Donation Statement Form ROSCOMMON CO. COUNCIL

ROSCOMMON COUNTY COUNCIL

27 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. General Information			
Name of Member	Melabaro dela Do		
Address for correspondence	Michael Maligar Ballaghadeved boRoscomm		
Telephone number			
Email	0477199781		
Fax number	CVR Mulligan@ Roscommon blr. 12		
Political party, if any			
Local authority	Rosconner		
Local electoral area			
	BEYLEZ		

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

Please tick ($$) one box only:	Yes		No		ĺ
----------------------------------	-----	--	----	--	---

	(1)	(2)	/2)	141	/=>	1 423	
	Value of	Name and	(3) Nature of	(4) Description	(5) The date	(6)	(7)
	−Donation−	Address	Donation 1		on which	if the donation was	Was a receipt
	(€)	Of Donor	Donation.	of Donor ²	the	requested	issued to the
				ļ	donation	from the	Donor in respect of the donation?
					was	Donor, what	or the donation?
				ļ	received	is the name	If yes, provide
						and postal	the date on
			ĺ			address	which
			}			of the person	the receipt
						who	issued and the
			ļ			requested the	name of the
						donation	person
1							who issued the
ł		 		20			receipt
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		Mil		}]		
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	1	ĺ					
					}		

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

² For example, family member, friend, company, political party, etc.

I (name) Michael Mullig 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 Michael Mulliger
Declared before me fly want [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 and the second secon
w ho is identified to me by
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[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 9 Ros an Pontão Rosamo [place of signature]
this. 2.7. day of 1020 [date]
Tours wand PC.
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

Appendix 1 – Donation Statement Form ROSCOMMON COUNTY COUNCIL



Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. General Information			
Name of Member	JOSEPH MURPHY		
Address for correspondence	GOLTLUSTIA I SCRAMOGILISI CO · ROSCOMAD		
Telephone number			
Email	086 1052197		
Fax number	altimurphy (a) rosionone. 6. ic		
Political party, if any			
Local authority	ROSCHASA FAIL		
Local electoral area	BOILE		

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2019 and
31 December 2019?

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

(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
You S	Som Som	Nong	Wow E	300 M	None	Now K
						0

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

² For example, family member, friend, company, political party, etc.

	I (name) Jos 2 Pri MunPring 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.
	Declared before me loty feeling [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 500
	who is identified to me by
	whose identity has been established to me before the taking of this Declaration by the production to me of
	passport 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[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.
i	at Consheren STAShession, G. Rosanna [place of signature]
1	this 28 day of JANUARY [date] 2020
7.	Notry See hely
[signature of witness]

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

PENALTIES

Appendix 1 – Donation Statement Form ROSCOMMON COUNTY COUNCIL

ROSCOMMON CO. COUNCIL

27 JAN 2020

CORPORATE SERVICES

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. General Information			
Name of Member			
Name of Weinber	CLUR John Paris A Con		
Address for correspondence	ARDKEERAU ORLINGE		
Telephone number	087 9019334		
Email			
	CUR d'acuy han @ Roscommo, co co.ie		
Fax number			
	Fine Gast.		
Political party, if any			
Local authority	Fine Gael		
= oour dutilonty	Roscomo		
Local electoral area	Roscommon Athlone		
	Achlone		

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 2019 and 31 December 2019?

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

/41	(0)	101				<u> </u>
(1) Value of	(2) Name and	(3)	(4)	(5)	(6)	(7)
Donation	Address	Nature of	Description	The date	if the	Was a receipt
(€)	Of Donor	Donation ¹	of Donor2	on which	donation was	issued to the
(6)	Oi Doilot			the	requested	Donor in respect
				donation	from the	of the donation?
				was	Donor, what	
				received	is the name	If yes, provide
İ					and postal	the date on
	1				address	which
			}		of the person	the receipt
	1			1	who	issued and the
			ĺ		requested the	name of the
					donation	person
						who issued the
						receipt
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]	J			(
]						
]						1
				1		

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

² For example, family member, friend, company, political party, etc.

I (name) do solemnly and sincerely declare that the above statem	ent
is, to the best of my knowledge and belief, correct in every material respect and that I took all reasona	
action in order to be satisfied as to its accuracy. I make this solemn declaration consciention	
believing the same to be true and by virtue of the Statutory Declarations Act 1938.	_
Signed John Muyhla	
Declared before me	olic] by
who is personally known to me,	
or and the second secon	
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 n	ne
passport no	sh
issue] by the authorities of	he
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	s
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 ARAS AN Chan Ecut [place of signature]	
thisday of2.7././29[date]	
[signature of witness]	
[signalure of witness]	
<i>'</i>	
Please note that a witness must belong to one of the following categories: Commissioner for Oath	_

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

Appendix 1 – Donation Statement Form MON CO. COUNCIL ROSCOMMON COUNTY COUNCIL 27 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by March

(1 January 2019 to 31 December 2019)

1. General Information				
30				
Name of Member	Kathleen Shanogher			
Address for correspondence	Ard Horshinn J Athlene Rd Roscommon			
Telephone number	086 3726743			
Email				
	Cllr Kshanagher Ensternmencoco			
Fax number				
Political party, if any	Non Party			
Local authority	Roscommon Colo.			
Local electoral area	Roscommon,			

oid you receive any single donation exceeding €600 in value, or donations from t	he
ame person exceeding €600 in aggregate value, between 1 January 2019 and 1 December 2019?	
,	

(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
NIL	vil	wi l	writ	Nil	nil	vil.
						0

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

² For example, family member, friend, company, political party, etc.

I (name) Kat Wear Share W 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 Cllv Jostullen Strangelor
Declared before me walk Land Land Land [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
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 Avas an Chontae Roscomvo Mplace of signature]
this 2.7 day of January 220[date]
Tony ward PC
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

ROSCOMMON CO. COUNCIL 29 JAN 2020

Appendix 1 - Donation Statement Form

ROSCOMMON COUNTY COUNCIL
ROSCOMMON CO. COUNCIL

CORPORATE SERVICES

Local Elections (Disclosure of Donation and Expenditure) 26 1999 2020

Donation Statement by Member of a Local AuthOntoRATE SERVICES

(1 January 2019 to 31 December 2019)

1. Ge	neral Information
Name of Member	
Address for correspondence	ANTHON DALDRON
Telephone number	BALLINTIBBDA, DES COMO
Email	086 7866774
Fax number	POTHONGHALDROND ROSLOTINO 2000
Political party, if any	NONE
Local authority	NON PARTY
Local electoral area	Rosconnon co. Courcil
	Rosconnon MD

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 2019 and 31 December 2019?

Please tick ($$) one box only:	Yes		No 💆
----------------------------------	-----	--	------

(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	<i>'</i>				
	, ·					

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

² For example, family member, friend, company, political party, etc.

I (name) ANTHON DAL Mondo 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 Alathan.
Declared before me DANNY BYLLZ [name in capitals] a [notary public] [peace commissioner] [practicing solicitor] by [name of local authority member]
who is personally known to me,
or E
who is identified to me by who is personally known to me
whose identity has been established to me before the taking of this Declaration by the production to me
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[document number] issued on[date of issue] by the Minister for Justice, Equality and Defence or
travel document (other than refugee travel document)
at ARAS AN CHONTAE Researce [place of signature] this 29 th day of JANUAM [date] 2020
this 29. day of JANUAM [date] 2020
Danny Burk
[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

Appendix 1 – Donation Statement Form

ROSCOMMON COUNTY COUNCIE OSCOMMON CO. COUNCIL

29 JAN 2020

Local Elections (Disclosure of Donation and Expenditure) Act 1999

CORPORATE SERVICES

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. G	eneral Information
Name of Member	May was
Address for correspondence	Albus Mand. 4 Cannick New, Cumaghboy. 9th land, Co. Rescences on
Telephone number	HAMINA, CQ: KGSCONGN ON
Email	15226 Lengward MUL @ Gracon-Net.
Fax number	Lengward MUL @ Tracent-NeT.
Political party, if any	Mh
ocal authority	NIL
ocal electoral area	Roscommon
	Athlowe,

Did you receive any single donation exceeding €600 in value, or donations from the
same person exceeding €600 in aggregate value, between 1 January 2010 and
31 December 2019?

Please tick ($$) one box only:	Yes		No	X
----------------------------------	-----	--	----	---

(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
NIL	mh	NIL	WIL	Nel	NOL	NAL C
						C

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

² For example, family member, friend, company, political party, etc.

I (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 Newy Nand
Declared before mePA.T.R.L.L.K.L.L.D.V.F.F[name in capitals] a [notary public] [commissioner for oaths] [peace commissioner] [praeticing selicitor] by
who is personally known to me,
or a
who is identified to me by
whose identity has been established to me before the taking of this Declaration by the production to me
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[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
at. Canerolo. VI Dav. 3. Candagh kog [place of signature] this. 2.9. day of . [QUIULULU 20.20 [date]
this. 2.9.11 day of . [[allulululululululululululululululululul
Pat de Wood with PI
Loignature of without
[signature of witness]

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

PENALTIES