Appendix 1

DONATION STATEMENT FORM

Local Elections (Disclosure of Donation and Expenditure) Act 1999

Donation Statement by Member of a Local Authority

[1st January, 2025 to 31st December, 2025]

1. GENERAL INFORMATION	
Name of Member	*Pat Dunphy*
Address for Correspondence	*Ballygorey,* *Mooncoin,* *Co Kilkenny.*
Telephone Number	*087 - 6789304*
Email	*cllrpat.dunphy@kilkennycoco.ie*
Fax Number	N/A
Political Party, if any	*Fine Gael*
Local Authority	*Kilkenny County Council*
Local Electoral Area	*Piltown Electoral 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 1st January, 2025 and 31st December, 2025.

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 DECLARTION

I **Pat Dunphy** 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: Pat Dunphy

Declared before me MARY HILDA CAVANAGH ~~[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.: _____ *[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.

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 & Defence.

at Co. Hall, Kinkenny *[Place of Signature]*

this 19th day of January, 2026

Mary Hilda Cavanagh
[Signature of Witness]

Please note that a witness must 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.