

## Designation of Treasurer

Prescribed by Secretary of State 07/05

| All Committees   |                    |  |  |
|--|--------------------|--|--|
| Full Name of Committee<br><b>FTPM- FRANKLIN TOWNSHIP PEOPLE MATTER</b>   |                    |  |  |
| Street Address<br><b>1415 Hickory Run Dr.</b>  |                    | Telephone Number<br><b>614-395-8898</b>    | e-mail Address<br><b>FTPeopleMatter@gmail.com</b>  |
| City<br><b>Columbus</b>  | State<br><b>OH</b> | Zip Code<br><b>43204</b>                   | FAX Number   |
| Full Name of Treasurer<br><b>Jessica A Rice</b>  |                    |  |  |
| Street Address<br><b>1415 Hickory Run Dr.</b>  |                    | Telephone Number<br><b>614-395-8898</b>    | e-mail Address<br><b>FTPeopleMatter@gmail.com</b>  |
| City<br><b>Columbus</b>  | State<br><b>OH</b> | Zip Code<br><b>43204</b>                   | FAX Number   |
| Full Name of Deputy Treasurer (if any)   |                    |  |  |
| Street Address   |                    | Telephone Number                           | e-mail Address   |
| City   | State              | Zip Code                                   | FAX Number   |
| Candidate's Campaign Committees Only   |                    |  |  |
| Full Name of Candidate   |                    | Party Affiliation/Independent/Non-Partisan |  |
| Street Address   |                    | Office Sought                              | Subdivision/District   |
| City   | State              | Zip Code                                   | Election Year  |
| Signature of Candidate   |                    | Date                                       |  |
| Political Action Committees Only   |                    |  |  |
| Is the PAC sponsored by a labor organization or corporation?<br><input type="checkbox"/> No <input type="checkbox"/> Yes |                    | If Yes, name the sponsor                   |  |
| PAC Registration Number  |                    | Authorized Signature                       | Date   |
| Political Parties, Political Contributing Entities, or Legislative Campaign Funds Only                                   |                    | List any affiliated PACs                   |  |
| Authorized Signature   |                    | Date                                       | Ballot Issue PAC?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

Signature of Treasurer  


Date  
**9/8/15**

Reason(s) for filing this form:

- ☒ Original Designation of Treasurer/Acknowledgement of Appointment  
☐ Change of Treasurer/Acknowledgement of Appointment  
☐ Designation or change of Deputy Treasurer  
☐ Change of Address for \_\_\_\_\_

☐ Change of Committee name. The previous name was: \_\_\_\_\_

☐ Change of Filing Location. The previous location was: \_\_\_\_\_

The new location is: \_\_\_\_\_

☐ Change of Office Sought from \_\_\_\_\_ to \_\_\_\_\_

☐ Other. Please explain: \_\_\_\_\_