

JON HUSTED
Ohio Secretary of State



Designation of Treasurer

Form 30-D

ORC 3517.10

TYPE OF FILING: ☒ **NEW** ☐ **UPDATE**

COMMITTEE TYPE: ☒ **Candidate** ☐ **PAC** ☐ **PCE** ☐ **Political Party** ☐ **Legislative Campaign Fund**

If update, please check the appropriate reason(s):

☒ Change of Committee Name. Prior Name was: Committee to elect Kirk

☐ Change of Filing Location. Prior Location was: NA New Location is: _____

☐ Change of Office Sought. Previous Office Sought: Council New Office Sought: Council

☐ Change of Treasurer Info ☐ Designation or Change of Deputy Treasurer Info

☐ Change of address/phone/email for: ☐ Committee ☐ Treasurer ☐ Deputy Treasurer ☐ Candidate

☐ Other Please Explain: _____

All Committees

Full Name of Committee <u>Kirk for Council</u>				PAC # (if Updated)	
Street Address <u>4023 Graves Dr.</u>		City <u>Obetz</u>	State <u>OH</u>	Zip <u>43207</u>	
Telephone <u>614 623 0052</u>		Email <u>akirk1967@yahoo.com</u>			
Treasurer <u>Angela Kirk</u>		Telephone <u>614 623 0052</u>		Email	
Street Address <u>4023</u>		City <u>Obetz</u>	State <u>OH</u>	Zip <u>43207</u>	
Deputy Treasurer (if any) <u>N/A</u>		Telephone		Email	
Street Address		City	State	Zip	

Candidate Committees Only

Full Name of Candidate <u>Angela Kirk</u>			Email		
Street Address <u>4023 Graves Dr.</u>		City <u>Obetz</u>	State <u>OH</u>	Zip <u>43207</u>	
Office Sought & Subdivision/District <u>Council of OBETH</u>		Party Affiliation/Independent/Non-Partisan		Election Year <u>2017</u>	

Political Action Committees Only

PAC is sponsored by: ☐ Labor Organization ☐ Corporation ☒ Not Sponsored	If Sponsored, Name the Sponsor		Acronym Used (if any)
	If Ballot Issue PAC, list issue		
Is this a Ballot Issue PAC ☐ Yes ☒ No	PACs and PCEs Only	List any Affiliated PACs/PCEs	

Angela Kirk
Signature of Treasurer or Deputy Treasurer

10/12/17
Date (MM/DD/YYYY)

Angela Kirk
Signature of Candidate if Candidate Committee

10/12/17
Date (MM/DD/YYYY)