

Designation of Treasurer

Prescribed by Secretary of State 07/05

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2015 NOV 30 AM 9:51

All Committees			
Full Name of Committee: <u>Doersam for Franklin County</u>			
Street Address: <u>294 Wyandotte Ave.</u>		Telephone Number: <u>614-288-6747</u>	e-mail Address: <u>rob.doersam@gmail.com</u>
City: <u>Columbus</u>	State: <u>OH</u>	Zip Code: <u>43202</u>	FAX Number:
Full Name of Treasurer: <u>Robert Russell Doersam</u>			
Street Address: <u>294 Wyandotte Ave.</u>		Telephone Number: <u>614-288-6747</u>	e-mail Address: <u>rob.doersam@gmail.com</u>
City: <u>Columbus</u>	State: <u>OH</u>	Zip Code: <u>43202</u>	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: <u>Robert Russell Doersam</u>		Party Affiliation/Independent/Non-Partisan: <u>Democrat</u>	
Street Address: <u>294 Wyandotte Ave.</u>		Office Sought: <u>Franklin County Democratic CCC</u>	Subdivision/District: <u>Ward 16</u>
City: <u>Columbus</u>	State: <u>OH</u>	Zip Code: <u>43202</u>	Election Year: <u>2016</u>
Signature of Candidate: <u>[Signature]</u>		Date: <u>11/25/15</u>	
Political Action Committees Only			
Is the PAC sponsored by a labor organization or corporation? <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? <input type="checkbox"/> Yes <input type="checkbox"/> No

Signature of Treasurer: [Signature]

Date: 11/25/15

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: _____