

Designation of Treasurer

Form 30-D

ORC 3517.10

TYPE OF FILING: X NEW	☐ UPDATE						
COMMITTEE TYPE: 💢 Candi	idate 🗌 PAC 🛭	PCE	Political P	arty 🔲	Leg	islative Campaign Fund	
If update, please check the app	ropriate reason(s):		·				
Change of Committee Name.	Prior Name was:						
Change of Filing Location.	Prior Location was: New Location is:						
Change of Office Sought.	Previous Office Sought: New Office Sought:						
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 for Debora KMill						PAC # (if Updated)	
l Street Address	χ	City	1	Si	ate	Zip	
5102 Zimnes	- Drive	61	/	0,	#	zip 43232	
Treasurer \ / (/ 2 0 / 1) Telephone / Email / Telephone / Email /							
Treasurer Debrack K	niller		phone	Email	Si	e Abron	
Street Address		City		S	tate	Zip	
eputy Treasurer (if any)		Telephone	Ema Ema		il		
Street Address		City	City		tate	Zip	
Candidate Committees C)nly		·		!		
FOR Name of Candidate KMiller			Email			abore	
Street Address		City		S	tate	Zip	
Office Sought & Subdivision/District		Party Affilia	Party Affiliation/Independent/Non-Partisan			Election Year	
Trustee Madison Tomaship			2019				
Political Action Committe	ees Only						
PAC is sponsored by: Use If Sponsored, Name the Sponsor Labor Organization			Acro			cronym Used (if any)	
Corporation If Bal	If Ballot Issue PAC, list issue						
Is this a Rallot Issue PAC List any Affiliated PACs/PCEs							
Yes Q No PACs and PCEs Only							
Signature of These year or Depute Treasurer Date (MM/DD/YYY) Signature of These year or Depute Treasurer Date (MM/DD/YYY) Signature of Specific Scandidate if Candidate Committee Date (MM/DD/YYY)							