Designation of Treasurer Prescribed by Secretary of State 07/05

Full Name of Committee Tennifer Staken for To	vosto a	•		1 Brown
Street Address Jennifer Staten for Tr	Telephone I	Number	e-mail Address	
6639 Fotale View Drive N	423	-3411 -1612 Zip Code	Jeniko Sto	ten FHH5@gmai
Blackink	OH	43004	FAX Number	0
ull Name of Treasurer				
treet Address States	Tr. t	N	T- 2 A 44	
itreet Address	Telephone I		e-mail Address	
6039 Estate View Dr. N	State	Zip Code	FAX Number	HEUFHHZ OG GW
24-1/201	OH	1-13cm	rax Number	Q
Full Name of Deputy Treasurer (if any)		. (305)		
treet Address	Telephone Number		e-mail Address	
City	State	Zip Code	FAX Number	
	ОН			
Candidate's Campaign Committee	s Only			
Full Name of Candidate	Name of Candidate		Party Affiliation/Independent/Non-Partisan	
Address Office Soug			Indep.	
treet Address	Office Soug	ght	Subdivision/Listrict	Tetterson Townshi
6039 Estate View D. N	True	tee	Taylor Ricks	Estore
ity .	State	Zip Code	Election Year	- Tub
Blacklick	ОН	143004	12017	
ignature of Cardidate		•	6123 17	
Political Action Committees Only				The state of the s
s the PAC sponsored by a labor If Yes, name the sponsor reganization or corporation?				Acronym, if any
No Tyes. AC Registration Number Authorized Signature		Date	List any affiliated PACs	
Political Parties, Political Contributing Enti	ities.			
or Legislative Campaign Funds Only				
Authorized Signature		Date	Ballot Issue PAC?	
				Yes DNo
// // /////		%	13/17	
ignature of Measurer		Date	—	
Reason(s) for filing this form:				
Change of Treasurer/Acknowledgement of App	ement of a	Appointment		
Designation or change of Deputy Treasurer	Millione			
☐ Change of Committee name. The previous nam	ie was:			
Change of Filing Location. The previous location				
The new location is:				
Change of Office Sought from				
Cther Please evaluin				