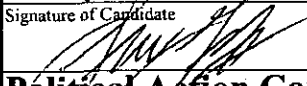
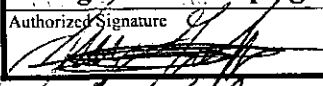


Designation of Treasurer

Prescribed by Secretary of State 07/05

All Committees				
Full Name of Committee Friends of LEW Gr.F.F.n				
Street Address 2737 Cuts Neck Rd		Telephone Number 614-203-1874	e-mail Address 191.H.A. @ LEWGr.F.F.n.COM	
City Blacklick	State OH	Zip Code 43004	FAX Number	
Full Name of Treasurer LEWIS G. Gr.F.F.n				
Street Address 2737 Cuts Neck Rd		Telephone Number 614-203-1874	e-mail Address 191.H.A. @ LEWGr.F.F.n.COM	
City Blacklick	State OH	Zip Code 43004	FAX Number	
Full Name of Deputy Treasurer (if any)				
Street Address		Telephone Number	e-mail Address	
City	State OH	Zip Code	FAX Number	
Candidate's Campaign Committees Only				
Full Name of Candidate LEWIS G. Gr.F.F.n			Party Affiliation/Independent/Non-Partisan	
Street Address 2737 Cuts Neck Rd		Office Sought School Board	Subdivision/District BAHAMIA-JEFFERSON School	
City Blacklick	State OH	Zip Code 43004	Election Year 2015	
Signature of Candidate 			Date 11-9-15	
Political Action Committees Only				
Is the PAC sponsored by a labor organization or corporation? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		If Yes, name the sponsor		Acronym, if any
PAC Registration Number	Authorized Signature	Date	List any affiliated PACs	
Political Parties, Political Contributing Entities, or Legislative Campaign Funds Only				
Authorized Signature 		Date 11-9-15	Ballot Issue PAC? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Signature of Treasurer

Date

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: _____