

Designation of Treasurer

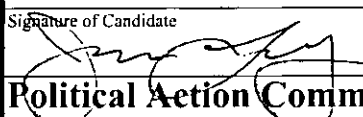
Prescribed by Secretary of State 07/05

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All Committees

| | | | | | |
|---|-------------|-------------------|--|--|--|
| Full Name of Committee Citizens for Leeseberg | | | | 13 MAR 22 PM 1:19 | |
| Street Address 651 Rose Way | | Telephone Number | | e-mail Address citizens4leeseberg@gmail.com | |
| City Gahanna | State OH | Zip Code 43230 | | FAX Number | |
| Full Name of Treasurer Angela Michelle Leeseberg | | | | | |
| Street Address 651 Rose Way | | Telephone Number | | e-mail Address citizens4leeseberg@gmail.com | |
| City Gahanna | State OH | Zip Code 43230 | | FAX Number | |
| Full Name of Deputy Treasurer (if any) James David Leeseberg | | | | | |
| Street Address 651 Rose Way | | Telephone Number | | e-mail Address citizens4leeseberg@gmail.com | |
| City Gahanna | State OH | Zip Code 43230 | | FAX Number | |

Candidate's Campaign Committees Only

| | | | | | |
|--|-------------|-------------------------------|--|---|--|
| Full Name of Candidate James David Leeseberg | | | Party Affiliation/Independent/Non-Partisan Non-Partisan | | |
| Street Address 651 Rose Way | | Office Sought City Council | | Subdivision/District Gahanna, Ward 4 | |
| City Gahanna | State OH | Zip Code 43230 | | Election Year 2013 | |
| Signature of Candidate  | | | | Date 3/18/13 | |

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 | | 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 | 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: _____