## Designation of Treasurer Prescribed by Secretary of State 07/05

Full Name of Committee	Grove City	_	
Street Address	Telephone Number	e-mail Address	
3150 (au ffen De	114-832-2547	edfler is s	J. and
City	State Zip Code	FAX Number	1 comoth
(rova City	OH 43123		
Full Name of Treasurer			
Shirley A Spell	man.		
Street Address	Telephone Number	e-mail Address	,
4/20 I ROQUOIS CT.	(614) 875-7525	CS2548700 a	of.com.
City 6: 61 1/2100	State Zip Code	FAX Number	
GROVE City 6h 43123	OH 43/23		
Full Name of Deputy Treasurer (if any)			
Street Address	Talashora Number	Township Address	
Check thempos	Telephone Number	e-mail Address	
City	State Zip Code	FAX Number	
•	OH		1
Candidate's Campaign Committees	Only		
Full Name of Candidate	July	Party Affiliation/Independent/Non-Part	ison
Fluid A Fle	Mi A S-	A 1 - P	L' 5 C
Street Address	Office Sought	Subdivision/District	
3/90 Guffer Dr.	City Camil	Ward	
City	State Zio Code	Election Year	
Grove Sity	I	12017	
Signature of Candidate	,	Date	
		18-07-14	
Political Action Committees Only			
Is the PAC sponsored by a labor organization or corporation?  No Dives.		Acron	yun if any
PAC Registration Number Authorized Signature	Date	List any affiliated PACs	
			1 1
Political Parties, Political Contributing Enti	ties,		1
or Legislative Campaign Funds Only			
Authorized Signature	Date	Ballot Issue PAC?	
1		☐ Yes	- No
XI AX	1 1	- / /	
Signature of Treasurer	lman	8/18/17	
Signature of Treasurer	Date	1	
Reason(s) for filing this form:			
Original Designation of Treasurer/Acknowledge	ement of Appointment		
Change of Treasurer/Acknowledgement of App Designation or change of Deputy Treasurer	ointment		
Change of Committee name. The previous name			
Change of Filing Location. The previous location			
			ì
			i
Change of Office Sought from	to		