

Designation of Treasurer

Prescribed by Secretary of State 07/05

FILED

12 JAN 31 PM 1:56

All Committees			
Full Name of Committee <i>Gibson for TRUSTEE</i>		FRANKLIN COUNTY BOARD OF ELECTIONS	
Street Address <i>5654 LINN DR.</i>	Telephone Number <i>614-270-8370</i>	e-mail Address <i>Gibson5654@MSN.COM</i>	
City <i>GROVE CITY</i>	State <i>OH</i>	Zip Code <i>43123</i>	FAX Number
Full Name of Treasurer <i>Tamara L. Christian</i>			
Street Address <i>6973 NORWOOD DR.</i>	Telephone Number <i>614-270-4421</i>	e-mail Address <i>Tammy@SBCGLOBAL.NET</i>	
City <i>GROVE CITY</i>	State <i>OH</i>	Zip Code <i>43123</i>	FAX Number
Full Name of Deputy Treasurer (if any) <i>Shane E. Gibson</i>			
Street Address <i>5654 LINN DR.</i>	Telephone Number <i>614-270-8370</i>	e-mail Address <i>Gibson5654@MSN.COM</i>	
City <i>GROVE CITY</i>	State <i>OH</i>	Zip Code <i>43123</i>	FAX Number
Candidate's Campaign Committees Only			
Full Name of Candidate <i>Shane E. Gibson</i>		Party Affiliation/Independent/Non-Partisan	
Street Address <i>5654 LINN DR.</i>	Office Sought <i>Pleasant Township Trustee</i>	Subdivision/District	
City <i>GROVE CITY</i>	State <i>OH</i>	Zip Code <i>43123</i>	Election Year
Signature of Candidate <i>Shane E. Gibson</i>		Date <i>01/31/2012</i>	
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	
PAC Registration Number		Authorized Signature	Date
Political Parties, Political Contributing Entities, or Legislative Campaign Funds Only		List any affiliated PACs	
Authorized Signature		Date	Ballot Issue PAC? <input type="checkbox"/> Yes <input type="checkbox"/> No

Tamara L. Christian
Signature of Treasurer

1/30/12
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: _____