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



All Committees			or and a second	JUN - 9 AF 4: 2	
Full Name of Committee CONISON FOR COUNCIL			Fi	ARKLIN COUNTY	
Street Address Telephone Number			e-mail Address	<del>RD OF ELECTIVI</del>	
958 KARL STREET		236-9674	<u></u>	CONISONFORCOUNCIL@YAHOO.COM	
Сііу WHITEHALL	State OH	Zip Code 43227	FAX Number		
Full Name of Treasurer		<del>- 1</del>			
MARC LEE CONISON					
Street Address 958 KARL STREET		Number 596-7666	e-mail Address MCONISON@YAHO	MCONISON@YAHOO.COM	
City	State	Zip Code		FAX Number	
WHITEHALL	OH	43227			
Full Name of Deputy Treasurer (if any)		<u>-</u>			
Street Address	Telephone	Number	e-mail Address	e-mail Address	
ity State OH		Zip Code	FAX Number	FAX Number	
Candidate's Campaign C	ommittees Only				
Full Name of Candidate KAREN LYNN CONISON			Party Affiliation/Independent/Non NON-PARTISAN	Party Affiliation/Independent/Non-Partisan NON-PARTISAN	
		ghi COUNCIL AT-LARC	Subdivision/District WHITEHALL		
City WHITEHALL	State OH	Zip Code 43227	Election Year 2011		
Signature of Candidate Convol			Date 6/8/2011	3	
<b>Political Action Committee</b>	ees Only		· · · · · · · · · · · · · · · · · · ·		
Is the PAC sponsored by a labor organization or corporation?  LINo Lives.	sof			Acronym, if any	
PAC Registration Number Authorized Signature		Date	List any affiliated PACs		
Political Parties, Political Contr	-				
or Legislative Campaign Funds	Only	10	D. CO		
Authorized Signature		Date	Ballot Issue PAC?	□No	
note Com			6/8/2011		
Signature of Treasurer  Reason(s) for filing this form:			ate		
Original Designation of Treasure Change of Treasurer/Acknowledge Designation or change of Deputy	gement of Appointment Treasurer				
Change of Committee name. The	previous name was:				
Change of Filing Location. The p	revious location was:		·····		
The n	ew location is:			····	
Change of Office Sought from _		to			
Other Please explain:		<u>-</u>			