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

All Committees				BUAND OF FIFCTIONS	
Full Name of Committee	ZZNS FOR F	FAIR	TAXATION	Buarro St	**
Street Address		Telephone i	Number	e-mail Address	· .
Street Address 4900 MANGPORT RS City		State	Zip Code	TMCKEE 398 A	TT, COM
COLS		011	43220	PAX Number	
Toll Manager					<u>_</u>
TERRY M KEE Street Address Telephone Number Telephone Number					
4500 LANGPORT RD		Telephone Number 6/4 457 3283		TMCKEE39 @ ATT. NET	
City		State	Zip Code	FAX Number	7AII, NET
COLUMBUS		OH	43220		
Full Name of Deputy Treasurer (if any)					
Street Address			lumber	e-mail Address	
City		State	Zip Code	FAX Number	
Candidate's Campaign Committees Only					
Full Name of Candidate				Party Affiliation/Independent/Non-Partisan	
Street Address		Office Sought		Subdivision/District	
City		State	Zip Code	Election Year	
Signature of Candidate				Date	
organia di Caracat					
Political Action Committees Only					
Is the PAC sponsored by a labor or corporation? If Yes, name the sponsor or corporation? No UYes.					Acronym, if any
PAC Registration Number	Authorized Signature Do		Date	List any affiliated PACs	
Political Parties, Political Contributing Entities,					
or Legislative Campaign Funds Only Authorized Signature Date				Ballot Issue PAC?	
]	☐ Yes	□ No
Signature of Treasurer 10/9/14 Date					
Reason(s) for filing thi Original Designat Change of Treasu	tion of Treasurer/Acknowledge rer/Acknowledgement of Appo lange of Deputy Treasurer	ointment	Appointment		
☐ 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:					