30-D
R.C. 3517.10

Designation of Treasurer
Prescribed by Secretary of State 07/05

All Committees

Full Name of Committee
Moncman for Grove City Council

Street Address	Telephone Number	e-mail Address
4780 Saint Andrews Drive	(614) 309-6725	lgleasure@hotmail.com

City	State	Zip Code	FAX Number
Grove City	OH	43123	

Full Name of Treasurer
Lisa A. Leasure

Street Address	Telephone Number	e-mail Address
4780 Saint Andrews Drive	(614) 309-6725	lgleasure@hotmail.com

City	State	Zip Code	FAX Number
Grove City	OH	43123	

Full Name of Deputy Treasurer (if any)

Street Address	Telephone Number	e-mail Address

City	State	Zip Code	FAX Number
	OH		

Candidate's Campaign Committees Only

Full Name of Candidate	Party Affiliation/Independent/Non-Partisan
Patricia A. Moncman	

Street Address	Office Sought	Subdivision/District
4717 Nicholas Pointe Drive	City Council Ward Four	

City	State	Zip Code	Election Year
Grove City	OH	43123	2015

Signature of Candidate	Date
Patricia A Moncman	6/25/15

Political Action Committees Only

Is the PAC sponsored by a labor organization or corporation? ☐No ☐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? ☐Yes ☐No

Lisa A. Leasure	06/25/2015
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: _____