Designation of Treasurer

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	Prescribed by	y Secretary of State 07/05	11 AUG -3 PM 12:	: 12
All@ommittees		NATIONAL PROPERTY OF A		
Full Name of Committee Committee To ELEC	T CAR	OL J. McKE	BOARD OF ELECT	ONS
Street Address ACADEMY COURT W	Telephone N		e-mail Address Mc KEN 4@ aol. con	7
GAHANNA	State OH	Zip Code 43230-6140	FAX Number	
Full Name of Treasurer ALVIN J. MCKERINI	4		·	
ALVIN J. MCKENN Street Address 202 ACADEMY COURT L	Telephone N		e-mail Address	
City	State	(2) 475-1511 Zip Code	EAX Number	τ, α
GAHAN NA Full Name of Deputy Treasurer (if any)	ОН	43230-6140		
Street Address	Telephone N	lumber	e-mail Address	
City	State OH	Zip Code	FAX Number	
Candidate's Campaign Commit	tees Only	Total of State	A STATE OF THE STA	
Full Name of Candidate CAROL J. McKenna			Party Affiliation/Independent/Non-Partisan Non-PARTISAN	
Office So		_	Subdivision/District	$\frac{1}{1}$
202 ACADEMY COURT W.	Sc HOOL State	L BOARD MEMBER	GAHANNA JEFFERSON SCHOOL	J/27
GAHANNA	OH	43230-6140	2011	
Signature of Candidate Me Hammer Sand J. Me Hamm	-		Date 8/2 / 11	2 4 5
Political Action Committees On	ly			t.a
Is the PAC sponsored by a labor organization or corporation?			Acronym, if any	
PAC Registration Number Authorized Signature		Date	List any affiliated PACs	
Political Parties, Political Contributing	29 22 170	The control of the co	1	
or Legislative Campaign Funds Only Authorized Signature		Date	Ballot Issue PAC?	
Autorized Signature		Date	Yes No	
MOZAK		0	lalu	
Signature of Treasurer		Date	12/11	
Reason(s) for filing this form: Coriginal Designation of Treasurer/Acknow Change of Treasurer/Acknowledgement of Designation or change of Deputy Treasurer Change of Address for	`Appointment r			
Change of Committee name. The previous				
Change of Filing Location. The previous lo				
Change of Office Sought from				
Other. Please explain:				