
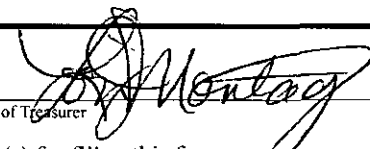


Designation of Treasurer

Prescribed by Secretary of State 07/05

FILED

11 AUG -9 AM 10:17

All Committees			
Full Name of Committee LORI Montag for Fiscal officer			
Street Address 474 Darbyhurst		Telephone Number 614-878-7705	e-mail Address l Montag@ATT.NET
City Cols	State OH	Zip Code 43228	FAX Number
Full Name of Treasurer LORI Montag			
Street Address 474 Darbyhurst Rd		Telephone Number 614-878-7705	e-mail Address l Montag@ATT.NET
City Cols	State OH	Zip Code 43228	FAX Number
Full Name of Deputy Treasurer (if any)			
Street Address		Telephone Number	e-mail Address
City	State OH	Zip Code	FAX Number
Candidate's Campaign Committees Only			
Full Name of Candidate LORI Montag		Party Affiliation/Independent/Non-Partisan D	
Street Address 474 Darbyhurst Rd		Office Sought Fiscal officer	Subdivision/District Prairie
City Cols	State OH	Zip Code 43228	Election Year 2011
Signature of Candidate 		Date 8-9-11	
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		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 8-9-11	Ballot Issue PAC? <input type="checkbox"/> Yes <input type="checkbox"/> No

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: _____