Designation of Treasurer Prescribed by Secretary of State 07/05

All Committees 12 JUL -6 AM 9: 42				
Full Name of Committee				
Street Address	Telephone N	Sumber 2 Act 1	e-mail A MARITUF E.	LECTIONS TOOL
1680 CAYULTA CT	6/4 State	8 /1 5009 Zip Code	134FFY	CO HUL
GROVE, CITY	021	43123		
Full Name of Treasurer				
Street Address	Telephone N		e-mail Address	(1)
1650 CAJULTA CT	614 871 3009 State Zip Code		FAX Number	
GROVE CITY	46	43123		
Full Name of Deputy Treasurer (if any)				
Street Address	Telephone Number		e-mail Address	
City	State	Zip Code	FAX Number	
Candidata's Compaign Committees	Only			
Candidate's Campaign Committees Only Full Name of Candidate			Party Affiliation/Independent/N	Jon-Partisan
Street Address	Office Sought		Subdivision/District	
City	State	Zip Code	Election Year	
Signature of Candidate	1	<u> </u>	Date	
Political Action Committees Only				
Is the PAC sponsored by a labor If Yes, name the sponsor Acronym, if any				
organization or corporation? No		Date	List any affiliated PACs	
Aumorized Signature		Date	cist any anniated IACS	
Political Parties, Political Contributing Entities,				
or Legislative Campaign Funds Only Authorized Signature		Date	Ballot Issue PAC?	
Aumorized Signature		Date	Yes	s 🗆 No
11/11/19/11/2				
Signature of Tressurer	//)	-6-12	OARI
Reason(s) for filing this form:		Date		
☐ 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				
Other. Please explain:				