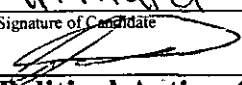
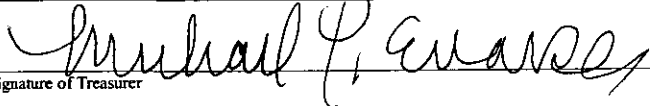


## Designation of Treasurer

Prescribed by Secretary of State 07/05

FILED

All Committees				FILED 16 JAN 2011	
Full Name of Committee <b>Friends of Joe Erb</b>					
Street Address <b>3293 Scioto Farms Dr</b>		Telephone Number <b>614-458-8121</b>		e-mail Address <b>erb@sppgrp.com</b>	
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>		FAX Number	
Full Name of Treasurer <b>Michael Evans</b>					
Street Address <b>4403 Britton Farms Ct</b>		Telephone Number <b>(614) 560-3929</b>		e-mail Address <b>mitxan@gmail.com</b>	
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>		FAX Number	
Full Name of Deputy Treasurer (if any) <b>Joseph Erb</b>					
Street Address <b>3293 Scioto Farms Dr</b>		Telephone Number <b>614-458-8121</b>		e-mail Address <b>erb@sppgrp.com</b>	
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>		FAX Number	
<b>Candidate's Campaign Committees Only</b>					
Full Name of Candidate <b>Joseph Erb</b>				Party Affiliation/Independent/Non-Partisan <b>Republican</b>	
Street Address <b>3293 Scioto Farms Dr</b>		Office Sought <b>City Council</b>		Subdivision/District <b>Hilliard</b>	
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>		Election Year <b>2011</b>	
Signature of Candidate 				Date <b>2/4/11</b>	
<b>Political Action Committees Only</b>					
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	
<b>Political Parties, Political Contributing Entities, or Legislative Campaign Funds Only</b>				Ballot Issue PAC? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Authorized Signature		Date			

Signature of Treasurer  


Date  
**2/14/11**

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: \_\_\_\_\_