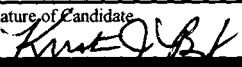
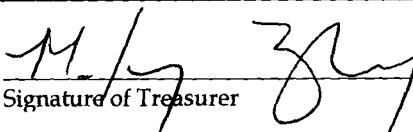


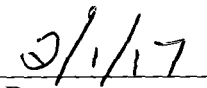
FILED
2017 FEB -1 PM 4: 03
TRANSILVANIA COUNTY

Designation of Treasurer

Prescribed by Secretary of State 5/05

Full Name of Committee Friends of Kristin Bryant			
Street Address PO Box 1523		Telephone Number	E-Mail Address
City Reynoldsburg	State OH	Zip Code 43219 43068	FAX Number
Full Name of Treasurer Mallory Murphy			
Street Address 4100 Regent Street, Suite A		Telephone Number 614-407-5297	E-Mail Address mallory@mallorymurphylaw.com
City Columbus	State OH	Zip Code 43219	FAX Number 614-559-9786
Full Name of Deputy Treasurer (if any)			
Street Address		Telephone Number	E-Mail Address
City	State	Zip Code	FAX Number
Full Name of Candidate Kristin Bryant			
Street Address 387 Cheyenne Way		Office Sought City Council - At Large	Party Affiliation/Independent/Non-Partisan Democrat
City Reynoldsburg	State OH	Zip Code 43068	Subdivision/District Reynoldsburg
Signature of Candidate 		Election Year 2017	
Date 2/1/17			
Is the PAC sponsored by a labor organization or corporation? <input type="checkbox"/> No <input type="checkbox"/> Yes		If Yes, name the sponsor	
PAC Registration Number		Authorized Signature	Acronym, if any
		Date	List any affiliated PACs
Authorized Signature		Date	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
☐ Designation of new 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 City Attorney to City Council

☐ Other. Please explain: _____