

Designation of Treasurer

Prescribed by Secretary of State 07/05

FILED

11 APR 12 PM 1:12

All Committees

Full Name of Committee: **FRIENDS OF DAVID SAMUEL** **FRANKLIN COUNTY BOARD OF ELECTIONS**

Street Address 243 CASWELL DR	Telephone Number 614-475-0817	e-mail Address dsamuel523@shcglobal.net
City GAHANNA	State OH	Zip Code 43230
		FAX Number

Full Name of Treasurer: **DAVID L. PARISH**

Street Address 63 MARCUS DR	Telephone Number 614-475-2919	e-mail Address DAVID-PARISH@ATT.NET
City GAHANNA	State OH	Zip Code 43230
		FAX Number N/A


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: **DAVID L. SAMUEL** Party Affiliation/Independent/Non-Partisan: **R**

Street Address 243 CASWELL DR.	Office Sought CITY COUNCIL AT LARGE	Subdivision/District GAHANNA
City GAHANNA	State OH	Zip Code 43230
		Election Year 2011

Signature of Candidate:  Date: **04-12-2011**

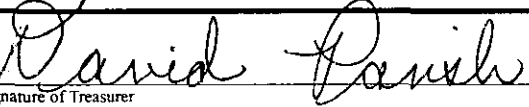
Political Action Committees Only

Is the PAC sponsored by a labor organization or corporation? ☐ No ☐ Yes If Yes, name the sponsor: _____ Acronym, if any: _____

PAC Registration Number	Authorized Signature	Date	List any affiliated PACs
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Political Parties, Political Contributing Entities, or Legislative Campaign Funds Only

Authorized Signature	Date	Ballot Issue PAC? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Signature of Treasurer: 

Date: **2-4-11**

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: _____