

Designation of Treasurer Prescribed by Secretary of State 07/05

FILED

All Committees					2015 JUL -2 AM 10: 06		
Full Name of Committee Residen	to for Kinterly	K.R	rdan	<u> </u>	FRANKLIN	COUNTY	
Street Address 3737	Shoreline Dr.	Telephone S	833-636.6	e-mail Address	יייינט טר נ	LECTIONS	
City Cols		State	Zip Code 43732	FAX Number		_	
Full Name of Treasurer	J. Jordan			,			
3737 Short Inc Dr.		Tolephone Number (614) 833-6366		e-mail Address			
Colum	ibus	State OH	12ip Code 43232	FAX Number			
Full Name of Deputy Treasurer	r (if any)						
Street Address		Telephone Number		e-mail Address			
City		State	Zip Code	FAX Number		•	
	ampaign Committees	Only		In			
Full Name of Candidate Kimberly J. Jordan					Party Affiliation/Independent/Non-Partisan		
3737 Shoveling Dr.		MAdisan Two Trusk			ck Estat	S Madison	
Colum	bus	State OH	43232	Election Year 2015			
Signature of Candidate	Dorden			55 25	115		
Political Action	r Committees Only				/	:Faa.:	
Is the PAC sponsored by a labor organization or corporation? [Xo] [] Yes.						mym, if any	
PAC Registration Number	Authorized Signature		Date	List any affiliated	PACs		
•	Political Contributing Enti- npaign Funds Only	ties,		}			
Authorized Signature			Date	Ballot Issue PAC?	☐ Yes	□ N°	
			!	<u>. </u>			
Signature of Treasurer			Date		_		
Change of Treasu	ation of Treasurer/Acknowledge urer/Acknowledgement of App hange of Deputy Treasurer	ointment	Appointment		_		
☐ Change of Comm	nittee name. The previous name						
Change of Filing	Location. The previous location						
☐ Change of Office	e Sought from		to				