Designation of Treasurer Prescribed by Secretary of State 07/05

	Prescribed	by Secretary of State 07/05	7017 JAN 17	š#! 0- 17	
All Committees	S. Arrigan			1941 - 27 7	
ull Name of Committee Committee for Aaron Schlaba	ch				
treet Address	Telephone		e-mail Address	``````	
865 Macon Alley	(614)	144-2042	wcurlis@columbus.rr.com		
City Columbus	State OH	Zip Code 43206	FAX Number (614) 444-2054		
full Name of Treasurer William L. Curlis		•			
Street Address	Telephone	Number	e-mail Address		
865 Macon Alley	· ·	444-2042	wcurlis@columbus.rr.com		
City Columbus	State OH	Zip Code 43206	FAX Number (614) 444-2054		
full Name of Deputy Treasurer (if any)	- ;	1			
none	lm 1 1	X7 1	7.11		
Street Address	Telephone	Number	e-mail Address		
City	State OH	Zip Code	FAX Number		
Candidate's Campaign Co				um e., in	
Full Name of Candidate Aaron Schlabach			Party Affiliation/Independent/Non-Partisan		
Street Address	Office Sou	ght	Subdivision/District		
2108 Juneau Way		County Municipal Cour			
City Grove City	State OH	Zip Code 43123	Election Year 2017		
Signature of Candidate	noch.		Date 0/-/0-/7		
Political Action Committee	es Only				
s the PAC sponsored by a labor If Yes, name the sponso organization or corporation? [No Tyes.]	r		Ac	ronym, if any	
PAC Registration Number Authorized Signature		Date	List any affiliated PACs		
Political Parties, Political Contrib	outing Entities,				
or Legislative Campaign Funds (•				
Authorized Signature Date		Date	Ballot Issue PAC?	Ballot Issue PAC?	
	/	.1.	168	INU	
11 ml -1	5		01-10-17		
ignature of Treasurer			0/-/0-/7 Date		
Reason(s) for filing this form: Original Designation of Treasurer/ Change of Treasurer/Acknowledge Designation or change of Deputy T Change of Address for	ement of Appointment Treasurer			_	
☐ Change of Committee name. The p	orevious name was: _				
Change of Filing Location. The pre-					
Change of Office Sought from					
Other. Please explain:				-	