

Designation of Treasurer

Form 30-5

ORC 3517.10

					
TYPE OF FILING: X NEW (1)	UPDATE			2019	MAY Zi Pin 3: So
COMMITTEE TYPE: 💢 Candid	date 🔲 PAC	PCE Politic	al Party	_ Legis	slative Campaign Fund
If update, please check the appr	opriate reason(s):			5/15	
Change of Committee Name.	Prior Name was:				
Change of Filing Location.	Prior Location was: New Location is:				
Change of Office Sought.	Previous Office Sought:	New Office Sought:			
Change of Treasurer Info	Designation or Change	of Deputy Treasurer Info			
Change of address/phone/email for: Committee Treasurer Deputy Treasurer Candidate					
Other Please Explain:			· ·		
All Committees					
Full Name of Committee					PAC # (if Updated)
JONN GALASSO 1 Street Address 2229 BLUE BE	FOR CONVCIL				
Street Address	· · · · · · ·	City		State Zi	p (/) / ,
2229 Blue BE	LL CRNE	GROVE C	374	on ;	77/L3
Telephone 614-875-2123 City State Zip 6ROVE CSTY ON Y3/23 Email John 954/9550 09 mn IC- Com					
Treasurer		Telephone	Fma	il	
JONN GALASSO)	614-875-21	23 10	4459	4/assogmate
Street Address		City		State Z	
2229 BLUE BELL	LANE	GROVE COS	4	0/1 9	13/23
Deputy Treasurer (if any)		Telephone	Ema	il	
Street Address		City		State Z	ip
Candidate Committees O	nly .			LL_	
Full Name of Candidate			Email		5 A A 2 1 25 C 50
JONN GEORGE	GALASSO		JOHNS	94/43	500gmnELCon
Street Address		City		State Z	
2229 Blut BELL	LANE	GROVE CT			43/23
Office Sought & Subdivision/District		Party Affiliation/Independent/Non-Partisan			Election Year
COUNCIL AT LAR		NON-PR	PATISAN		2019
Political Action Committe	es Only				
PAC is sponsored by: If Sponsored, Name the Sponsor Labor Organization Acronym Used (if any					onym Used (if any)
Corporation If Ball	ot Issue PAC, list issue				
Is this a Ballot Issue PAC	and PCEs Only List any Affi	iliated PACs/PCEs			
O Yes O No	1 3 - 3 - 4 - 10	0/2			1 25 25-26
Signature of Treasurer or Deputy Treasure	Date (MM/DD/YYYY)	Signature of Candidate	if Candidate Co	mmittee	Date (MM/DD/YYY)
pignature or recasurer or Deputy measure	Date (MINICOTTIT)	orginature of Candidate	vandidata Ut	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Dute (milked) (1 1 1)