



Designation of Treasurer

Form 30-D
ORC 3517.10

TYPE OF FILING: ☒ NEW ☐ UPDATE

COMMITTEE TYPE: ☒ Candidate ☐ PAC ☐ PCE ☐ Political Party ☐ Legislative Campaign Fund

If update, please check the appropriate reason(s):

- ☐ 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: _____

Full Name of Committee
Friends of Scott Singratsomboune

PAC # (if Updated)

Street Address
395 S Ohio Ave

City
Columbus

State
OH

Zip
43205

Telephone
614-344-1145

Email
scotty@singforcolumbus.com

Treasurer
Scott Singratsomboune

Telephone
614-344-1145

Email
scotty@singforcolumbus.com

Street Address
395 S Ohio Ave

City
Columbus

State
OH

Zip
43205

Deputy Treasurer (if any)

Telephone

Email

Street Address

City

State

Zip

Full Name of Candidate
Scott Nicholas Singratsomboune

Email
scotty@singforcolumbus.com

Street Address
395 S Ohio Ave

City
Columbus

State
OH

Zip
43205

Office Sought
Columbus City Council

Subdivision/District

Party Affiliation/Independent/Non-Partisan
Non-Partisan

Election Year
2019

- PAC is sponsored by:
- ☐ Labor Organization
- ☐ Corporation
- ☐ Not Sponsored

If Sponsored, Name the Sponsor

Acronym Used (if any)

If Ballot Issue PAC, list issue

Is this a Ballot Issue PAC

☐ Yes ☐ No

List any Affiliated PACs/PCEs

Signature of Treasurer or Deputy Treasurer

11/08/2018

Date (MM/DD/YYYY)

Signature of Candidate if Candidate Committee

11/08/2018

Date (MM/DD/YYYY)