



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: Committee to elect Kirk
- ☐ Change of Filing Location. Prior Location was: NA New Location is: _____
- ☐ Change of Office Sought. Previous Office Sought: Council New Office Sought: Council
- ☐ 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: Kirk for Council PAC # (if Updated) _____

Street Address: 4023 Graves Dr. City: Obetz State: OH Zip: 43207

Telephone: 614 623 0052 Email: akirk1967@yahoo.com

Treasurer: Angela Kirk Telephone: 614 623 0052 Email: _____

Street Address: 4023 City: Obetz State: OH Zip: 43207

Deputy Treasurer (if any): NA Telephone: _____ Email: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Full Name of Candidate: Angela Kirk Email: _____

Street Address: 4023 Graves Dr. City: Obetz State: OH Zip: 43207

Office Sought & Subdivision/District: Council of OBETH Party Affiliation/Independent/Non-Partisan: _____ Election Year: 2017

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

PACs and PCEs Only

List any Affiliated PACs/PCEs _____

Signature of Treasurer or Deputy Treasurer: Angela Kirk

Date (MM/DD/YYYY): 10/12/17

Signature of Candidate if Candidate Committee: Angela Kirk

Date (MM/DD/YYYY): 10/12/17