

Designation of Treasurer

Prescribed by Secretary of State 07/05

FILED

2011 JAN 28 PM 5:03

All Committees			
Full Name of Committee 3 GROVEPORT MADISON COMMITTEE FOR BETTER OF SCHOOLS			
Street Address 3345 EVERSON RD W		Telephone Number 614 321 6628	
City Columbus		e-mail Address sabrina-hoylman@yahoo.com	
State OH		Zip Code 43232	
FAX Number			
Full Name of Treasurer SABRINA L HOYLMAN			
Street Address 3345 EVERSON RD W		Telephone Number 614 321 6628	
City COLUMBUS		e-mail Address sabrina-hoylman@yahoo.com	
State OH		Zip Code 43232	
FAX Number L/P			
Full Name of Deputy Treasurer (if any) N/A			
Street Address		Telephone Number	
City		e-mail Address	
State		Zip Code	
FAX Number			
Candidate's Campaign Committees Only			
Full Name of Candidate		Party Affiliation/Independent/Non-Partisan	
Street Address		Office Sought	
City		Subdivision/District	
State		Election Year	
Zip Code			
Signature of Candidate		Date	
Political Action Committees Only			
Is the PAC sponsored by a labor organization or corporation? <input type="checkbox"/> No <input type="checkbox"/> Yes		If Yes, name the sponsor	
Acronym, if any			
PAC Registration Number		Authorized Signature	
Date		List any affiliated PACs	
Political Parties, Political Contributing Entities, or Legislative Campaign Funds Only			
Authorized Signature		Date	
Ballot Issue PAC?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Signature of Treasurer

Date

Reason(s) for filing this form:

- ☐ Original Designation of Treasurer/Acknowledgement of Appointment
☒ Change of Treasurer/Acknowledgement of Appointment
☐ Designation or change of Deputy Treasurer
☐ Change of Address for

☐ Change of Committee name. The previous name was: _____

☐ Change of Filing Location. The previous location was: _____

The new location is: _____

☐ Change of Office Sought from _____ to _____

☐ Other. Please explain: _____