Designation of Treasurer Prescribed by Secretary of State 07/05

| - ANTI-CO | | regulare de les | 10 Ann A - | ay Militar days 1 1 1 1 | |
|---|------------------------------------|---------------------|--|---|--|
| All Committees | | 3.0 | 7 监督世际的 | 'Z' 181 | |
| Full Name of Committee Citizens to Elect Mike Schadek | | | FRANKLIH CO. BOARD OF FLEE | ATT | |
| Street Address 1537 Guilford Road | Telephone Number (614) 554-5607 | | | MDSchadek@aol.com | |
| City | State Zip Code | | FAX Number | | |
| Columbus | OH | 43221 | | | |
| Full Name of Treasurer | | | | | |
| Linda L. Wiget, CPA | | | | | |
| Street Address | Telephone Number | | e-mail Address | | |
| 154 Piedmont Road | (614) 267-3578 | | wigetcpa@wowway.com | | |
| City Sta Columbus OH | | Zip Code 43214 | FAX Number (614) 267-3578 | | |
| Full Name of Deputy Treasurer (if any) | 1011 | 1.02.1 | , , | | |
| | | | <u> </u> | | |
| Street Address | ddress Telephone Number | | e-mail Address | | |
| City | State OH | Zip Code | FAX Number | FAX Number | |
| Candidate's Campaign Committee | s Only | | | | |
| Full Name of Candidate Michael A. Schadek | | | Party Affiliation/Independent Democrat | Party Affiliation/Independent/Non-Partisan Democrat | |
| Street Address Office So | | - | Subdivision/District | 1 ⁻⁷ | |
| 1537 Guilford Road | Count | y Auditor | Franklin | | |
| City Columbus | State OH | Zip Code 43221 | Election Year 2014 | | |
| Signature of Candidate Michael a. Schodul; | | | Date | | |
| Political Action Committees Only | | | | | |
| Is the PAC sponsored by a labor organization or corporation? | <u></u> . | | | Acronym, if any | |
| AC Registration Number Authorized Signature | | Date | List any affiliated PACs | List any affiliated PACs | |
| Political Parties, Political Contributing En | tities, | | | | |
| or Legislative Campaign Funds Only | | Date | Ballot Issue PAC? | | |
| Authorized Signature Date | | | Yes No | | |
| Signature of Treasurer Reason(s) for filing this form: Original Designation of Treasurer/Acknowled | gement of | Appointment | 4-19- 13 atc | | |
| ☐ Change of Treasurer/Acknowledgement of Ap ☐ Designation or change of Deputy Treasurer ☐ Change of Address for | pointment | | | | |
| Change of Committee name. The previous name. | | | <u> </u> | | |
| Change of Filing Location. The previous local | | | | | |
| The new location i | is: | | <u> </u> | | |
| Change of Office Sought from Upper Arlington C | | to County | Auditor | <u>-</u> | |
| Other. Please explain: | | | | · | |