



Designation of Treasurer

Form 30-D
ORC 3517.10

2019 JUL -8 PM 2:04

TYPE OF FILING: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> UPDATE			
COMMITTEE TYPE: <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> PCE <input type="checkbox"/> Political Party <input type="checkbox"/> Legislative Campaign Fund			
If update, please check the appropriate reason(s):			
<input type="radio"/> Change of Committee Name.		Prior Name was: _____	
<input type="radio"/> Change of Filing Location.		Prior Location was: _____ New Location is: _____	
<input type="radio"/> Change of Office Sought.		Previous Office Sought: _____ New Office Sought: _____	
<input type="radio"/> Change of Treasurer Info		<input type="checkbox"/> Designation or Change of Deputy Treasurer Info	
<input type="radio"/> Change of address/phone/email for:		<input type="radio"/> Committee <input type="radio"/> Treasurer <input type="radio"/> Deputy Treasurer <input type="radio"/> Candidate	
<input type="radio"/> Other Please Explain: _____			
All Committees			
Full Name of Committee <i>Ralph HORN FOR TRUSTEE</i>			PAC # (if Updated)
Street Address <i>1610 NEASTFIELD DR</i>	City <i>Columbus</i>	State <i>OH</i>	Zip <i>43223</i>
Telephone <i>614-2796833</i>	Email <i>HORN@FRANKLIN TOWNSHIP.COM</i>		
Treasurer <i>Ralph HORN</i>	Telephone <i>614-279-6833</i>	Email <i>HORN@FRANKLIN TOWNSHIP.COM</i>	
Street Address <i>1610 N. EASTFIELD DR</i>	City <i>Columbus</i>	State <i>OH</i>	Zip <i>43223</i>
Deputy Treasurer (if any)	Telephone	Email	
Street Address	City	State	Zip
Candidate Committees Only			
Full Name of Candidate <i>Ralph HORN</i>		Email <i>HORN@FRANKLIN TOWNSHIP</i>	
Street Address <i>1610 N EASTFIELD DR</i>	City <i>Columbus</i>	State <i>OH</i>	Zip <i>43223</i>
Office Sought & Subdivision/District <i>TOWNSHIP TRUSTEE</i>	Party Affiliation/Independent/Non-Partisan <i>NON</i>		Election Year <i>2019</i>
Political Action Committees Only			
PAC is sponsored by: <input type="radio"/> Labor Organization <input type="radio"/> Corporation <input type="radio"/> Not Sponsored	If Sponsored, Name the Sponsor _____ If Ballot Issue PAC, list issue _____		Acronym Used (if any) _____
Is this a Ballot Issue PAC <input type="radio"/> Yes <input type="radio"/> No	PACs and PCEs Only	List any Affiliated PACs/PCEs _____	

Ralph Horn
Signature of Treasurer or Deputy Treasurer

7/8/2019
Date (MM/DD/YYYY)

Ralph Horn
Signature of Candidate if Candidate Committee

7/8/2019
Date (MM/DD/YYYY)