Designation of Treasurer Prescribed by Secretary of State 07/05

14 MAR 25 AT 10: 37

| All Committees | | | | | |
|---|--------------------------------------|---------------------------|------------------------------------|-----------------------------------|--|
| Full Name of Committee Citizens Against Gahanna Taxation in Jeffers | on Town | shin | ROARD OF A | A FOTIONS | |
| Street Address | Telephone | | e-mail Address | | |
| | | 398-6465 | | e-mail Address CAGTJT@outlook.com | |
| City | | Zip Code | FAX Number | | |
| Blacklick Full Name of Treasurer | ОН | 43004 | | | |
| Eric W. Stover | | | | | |
| Street Address Teleph | | Number | c-mail Address | c-mail Address | |
| 6695 Taylor Rd | | 398-6465 | CAGTJT@outlook. | CAGTJT@outlook.com | |
| City Blacklick | | Zip Code FAX Number 43004 | | | |
| Full Name of Deputy Treasurer (if any) | <u>. L</u> | <u>:</u> | | | |
| Street Address Telephone Number e-mail Address | | | | | |
| Succe Address | | | c-man Addiess | e-mail Address | |
| City | State OH | Zip Code | FAX Number | | |
| Candidate's Compaign Committee | | <u>i</u> | | | |
| Candidate's Campaign Committees Only Full Name of Candidate Party Affiliation'Independent'Non-Partisan | | | | | |
| Tall Valle of Campions | | | Tany Atmaton macpendent Non-Famsan | | |
| Street Address Office S | | ghi | Subdivision/District | Subdivision/District | |
| City | State | Zip Code | Election Year | | |
| | | | | | |
| Signature of Candidate | | | Date | | |
| Political Action Committees Only | | | | | |
| Is the PAC sponsored by a labor If Yes, name the sponsor | <u> </u> | | | Acronym, if any | |
| rganization or corporation? ✓ No □[Yes. | | | | | |
| PAC Registration Number Authorized Signature | stration Number Authorized Signature | | List any affiliated PACs | List any affiliated PACs | |
| Political Parties, Political Contributing Entities, | | | | | |
| or Legislative Campaign Funds Only | , | | | | |
| Authorized Signature | | Date | Ballot Issue PAC? | Ballot Issue PAC? Ves No | |
| 1 | | | | | |
| 5-W. H | | • | 3/25/2014 | | |
| Signature of Treasurer | | | Date | | |
| Reason(s) for filing this form: Original Designation of Treasurer/Acknowledg Change of Treasurer/Acknowledgement of App Designation or change of Deputy Treasurer Change of Address for | ointment | | | | |
| Change of Committee name. The previous nam | | | | _ | |
| ☐ Change of Filing Location. The previous location was: | | | | | |
| The new location is: | | | | | |
| Change of Office Sought from | | | | | |
| Floring Discount Co. | | | | | |