Designation of Treasurer Prescribed by Secretary of State 07/05

All Committees			UNITATO SE CO
Full Name of Committee Support Your Bexley Library		FR	ANKLIN COUNTY ID OF FLECTIONS
Street Address 270 North Cassingham Road	Telephone Number (614) 464-8287	e-mail Address	gmail.com
City Bexley	State Zip Code OH 43209	FAX Number (614) 71	9-5053
Full Name of Treasurer			
Scott J. Ziance			
Street Address	Telephone Number	e-mail Address	
270 North Cassingham Road	(614) 464-8287		@gmail.com
City Bexley	State Zip Code OH 43209	FAX Number (614) 71	9-5053
Full Name of Deputy Treasurer (if any)			1
Street Address	Telephone Number	e-mail Address	
Street Address	retephone number	e-man Address	
City	State Zip Code OH	FAX Number	
Candidate's Campaign Cor	mmittees Only		
Full Name of Candidate		Party Affiliation/	Independent/Non-Partisan
Street Address	Office Sought	Subdivision/Distr	ict
City	State Zip Code	Election Year	
Signature of Candidate		Date	
Political Action Committee	es Only	**************************************	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Is the PAC sponsored by a labor If Yes, name the sponsor organization or corporation?			Acronym, if any
INo LiYes.		List any affiliated	I DA Co
PAC Registration Number Authorized Signature	Date	List any artmatec	iracs
Political Parties, Political Contrib	uting Entities,		
or Legislative Campaign Funds O			
Authorized Signature	Date	Ballot Issue PAC	Yes DNo
	F	1717	
		6-17-13	1
Signature of Treasurer	,	Date	
Reason(s) for filing this form: Original Designation of Treasurer/Acknowledge Change of Treasurer/Acknowledge Designation or change of Deputy T Change of Address for Committee	ment of Appointment reasurer	nt	
Change of Committee name. The p	revious name was:		
Change of Filing Location. The pre	vious location was:		
The nev	v location is:		
Change of Office Sought from	1	10	
Other. Please explain:			