Designation of Treasurer REOFIN

All Committees		i i i i i i i i i i i i i i i i i i i		4.400
Full Name of Committee SWEA-EPAC			FRANKLIN COU	NTY TIOMS
Street Address 4074 Hoover Road, Suite 201	Telephone Number (614) 875-3829		e-mindi Atlanessy UT CLUU	Herry
City Grove City	State OH	Zip Code 43123	FAX Number (614) 875-4854	
Full Name of Treasurer				
Rolla Beach	I=			,
Street Address 4148 Rowanne Court	Telephone Number (614) 451-1016		e-mail Address rbeach3@columbus.rr.com	
City	State Zip Code		FAX Number	
Columbus	OH	43214		
Full Name of Deputy Treasurer (if any) Carol Cross			·	
Street Address 13759 Hinton Mill Road	Telephone Number (614) 561-6739		e-mail Address	
City	State	Zip Code	FAX Number	
Marysville	OH	43040	177 Funder	
Candidate's Campaign Committees	Only	4,000		A TOTAL
Full Name of Candidate	,		Party Affiliation/Independent/Non-I	
Street Address	Office Sought		Subdivision/District -	
City	State OH	Zip Code	Election Year	
Signature of Candidate			Date	
Political Action Committees Only				
Is the PAC sponsored by a labor of lif Yes, name the sponsor organization or corporation?				ronym, if any
PAC Registration Number Authorized Signature		Date	List any affiliated PACs	
			4	
Political Parties, Political Contributing Ention-Legislative Campaign Funds Only		an anatal		
Authorized Signature			Ballot Issue PAC?	□No
Control of the contro		7 . 7/7 3	<u> </u>	<u>.</u>
DILL Bill		7/	7/13	
Signature of Treasurer		Date	<u> </u>	
Reason(s) for filing this form: Original Designation of Treasurer/Acknowledge Change of Treasurer/Acknowledgement of App Designation or change of Deputy Treasurer Change of Address for	ointment			_
☐ Change of Committee name. The previous name	e was: _			
Change of Filing Location. The previous location	on was: _			
				•
☐ Change of Office Sought from				
Other Please explain:				