



# Designation of Treasurer

Form 30-D

ORC 3517.10

2019 JUL 30 AM 10:58

**TYPE OF FILING:** ☒ **NEW** ☐ **UPDATE**

**COMMITTEE TYPE:** ☐ **Candidate** ☒ **PAC** ☐ **PCE** ☐ **Political Party** ☐ **Legislative Campaign Fund**

If update, please check the appropriate reason(s):

☐ Change of Committee Name. Prior Name was: \_\_\_\_\_

☐ Change of Filing Location. Prior Location was: \_\_\_\_\_ New Location is: \_\_\_\_\_

☐ Change of Office Sought. Previous Office Sought: \_\_\_\_\_ New Office Sought: \_\_\_\_\_

☐ Change of Treasurer Info ☐ Designation or Change of Deputy Treasurer Info

☐ Change of address/phone/email for: ☐ Committee ☐ Treasurer ☐ Deputy Treasurer ☐ Candidate

☐ Other Please Explain: \_\_\_\_\_

## All Committees

Full Name of Committee FORWARD COLUMBUS			PAC # (if Updated)	
Street Address 35 N. FOURTH ST., SUITE 340		City COLUMBUS	State OH	Zip 43215
Telephone		Email		
Treasurer JENNIFER LYNCH		Telephone	Email	
Street Address 35 N. FOURTH ST.		City COLUMBUS	State OH	Zip 43215
Deputy Treasurer (if any)		Telephone	Email	
Street Address		City	State	Zip

## Candidate Committee Only

Full Name of Candidate		Email	
Street Address		City	State Zip
Office Sought	Subdivision/District	Party Affiliation/Independent/Non-Partisan	Election Year

## Political Action Committees

PAC is sponsored by: <input type="radio"/> Labor Organization <input type="radio"/> Corporation <input type="radio"/> Not Sponsored	If Sponsored, Name the Sponsor	Acronym Used (if any)
If Ballot Issue PAC, list issue		
Is this a Ballot Issue PAC <input checked="" type="radio"/> Yes <input type="radio"/> No	List any Affiliated PACs/PCEs	

Signature of Treasurer or Deputy Treasurer	Date (MM/DD/YYYY)	Signature of Candidate if Candidate Committee	Date (MM/DD/YYYY)
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