

Designation of Treasurer

Prescribed by Secretary of State 07/05

All Committees			
Full Name of Committee <i>Roland Campaign</i>			
Street Address <i>1381 McJweel Lane</i>	Telephone Number <i>330-644-0327</i>	e-mail Address <i>proland1381@yahoo.com</i>	
City <i>Barberton</i>	State OH	Zip Code <i>44203</i>	FAX Number
Full Name of Treasurer <i>Pat Roland</i>			
Street Address <i>SAA</i>	Telephone Number	e-mail Address	
City	State OH	Zip Code	FAX Number
Full Name of Deputy Treasurer (if any)			
Street Address	Telephone Number	e-mail Address	
City	State OH	Zip Code	FAX Number
Candidate's Campaign Committees Only			
Full Name of Candidate <i>Pat Roland</i>		Party Affiliation/Independent/Non-Partisan	
Street Address <i>SAA</i>	Office Sought <i>Ward 4 Council</i>	Subdivision/District <i>New Franklin</i>	
City	State OH	Zip Code	Election Year
Signature of Candidate <i>Pat Roland</i>		Date <i>6-15-2011</i>	
Political Action Committees Only			
Is the PAC sponsored by a labor organization or corporation? <input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, name the sponsor	Acronym, if any	
PAC Registration Number	Authorized Signature	Date	List any affiliated PACs
Political Parties, Political Contributing Entities, or Legislative Campaign Funds Only			
Authorized Signature <i>Pat Roland</i>	Date <i>6-15-2011</i>	Ballot Issue PAC? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Signature of Treasurer

Date

Reason(s) for filing this form:

- Original Designation of Treasurer/Acknowledgement of Appointment
- Change of Treasurer/Acknowledgement of Appointment
- Designation or change of Deputy Treasurer
- Change of Address for _____
- Change of Committee name. The previous name was: _____
- Change of Filing Location. The previous location was: _____
The new location is: _____
- Change of Office Sought from _____ to _____
- Other. Please explain: _____

2011 JUN 15 PM 1:11

SUMMIT COUNTY BOARD OF ELECTIONS AKRON, OHIO

#3137 *AW*