

Designation of Treasurer

Prescribed by Secretary of State 07.05

All Committees			
Full Name of Committee CITIZENS FOR MACEDONIA FISCAL ACCOUNTABILITY			
Street Address 902 EILEEN DR	Telephone Number 330-467-9278	e-mail Address MUST1969@AOL.COM	
City MACEDONIA	State OH	Zip Code 44056	FAX Number _____
Full Name of Treasurer SHIRLEY J KOTH			
Street Address 902 EILEEN DR	Telephone Number 330-467-9278	e-mail Address MUST1969@AOL.COM	
City MACEDONIA	State OH	Zip Code 44056	FAX Number _____
Full Name of Deputy Treasurer (if any)			
Street Address			
Telephone Number			
e-mail Address			
City			
State			
Zip Code			
FAX Number			
Candidate's Campaign Committees Only			
Full Name of Candidate			Party Affiliation Independent/Non-Partisan
Street Address		Office Sought	Subdivision/District
City		State	Zip Code
Signature of Candidate		Date	
Date			
Political Action Committees Only			
Is the PAC sponsored by a labor organization or corporation? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		If Yes, name the sponsor	
PAC Registration Number		Authorized Signature	
Date		List any affiliated PACs	
Date		Ballot Issue PAC?	
Date		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Political Parties, Political Contributing Entities, or Legislative Campaign Funds Only			
Authorized Signature		Date	
Date		Ballot Issue PAC?	
Date		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Shirley J Koth
Signature of Treasurer

9/9/2016
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: _____

SEP - 9 AM 10:55
 BOARD OF ELECTIONS
 AKRON, OHIO
 #164