

Designation of Treasurer

Prescribed by Secretary of State 07/05

All Committees			
Full Name of Committee Friends of Becki Kovach			
Street Address 10291 Smugglers Cove	Telephone Number (216) 990-9650	e-mail Address bkovach522@gmail.com	
City Reminderville	State OH <input type="checkbox"/>	Zip Code 44202	FAX Number
Full Name of Treasurer Becki Kovach			
Street Address 10291 Smugglers Cove	Telephone Number (216) 990-9650	e-mail Address bkovach522@gmail.com	
City Reminderville	State OH <input type="checkbox"/>	Zip Code 44202	FAX Number
Full Name of Deputy Treasurer (if any)			
Street Address	Telephone Number	e-mail Address	
City	State OH <input type="checkbox"/>	Zip Code	FAX Number
Candidate's Campaign Committees Only			
Full Name of Candidate Becki Joyce Kovach		Party Affiliation/Independent/Non-Partisan Democrat	
Street Address 10291 Smugglers Cove	Office Sought Village Council	Subdivision/District Reminderville Vil	
City Reminderville	State OH <input type="checkbox"/>	Zip Code 44202	Election Year 2018
Signature of Candidate <i>Becki Keller</i>		Date 4-25-17	
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	Date	Ballot Issue PAC? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Becki Keller _____ Date 4-25-17

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: _____

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