

Designation of Treasurer

Prescribed by Secretary of State 07/05

All Committees				
Full Name of Committee <i>Committee to Elect Rob Felber</i>				
Street Address <i>1749 MORTUS DR</i>	Telephone Number <i>330-963-3664</i>	e-mail Address <i>RobFelber@felberPR.com</i>		
City <i>Twinsburg</i>	State <i>OH</i>	Zip Code <i>44087</i>	FAX Number	
Full Name of Treasurer <i>Sheryl J. Felber</i>				
Street Address <i>1749 MORTUS DR</i>	Telephone Number <i>330-963-1007</i>	e-mail Address <i>SSF99SSF@gmail.com</i>		
City <i>Twinsburg</i>	State <i>OH</i>	Zip Code <i>44087</i>	FAX Number	
Full Name of Deputy Treasurer (if any) <i>Robert Felber</i>				
Street Address <i>1749 MORTUS DR</i>	Telephone Number <i>330-963-3664</i>	e-mail Address <i>RobFelber@felberPR.com</i>		
City <i>Twinsburg</i>	State <i>OH</i>	Zip Code <i>44087</i>	FAX Number	
Candidate's Campaign Committees Only				
Full Name of Candidate <i>Robert Felber</i>			Party Affiliation/Independent/Non-Partisan <i>Non-Partisan</i>	
Street Address <i>1749 MORTUS DR</i>	City <i>Twinsburg</i>	State <i>OH</i>	Zip Code <i>44087</i>	Subdivision/District <i>Twins 2B</i>
Signature of Candidate <i>[Signature]</i>			Election Year <i>2017</i>	Date <i>8/7/17</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		Date	Ballot Issue PAC? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Sheryl J. Felber _____ 8/7/2017 _____
 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: _____

2017 AUG -7 PM 12:39
 AKRON, OH

#1200 ZBS

Local Candidate Finance Report Waiver

Due: Ten days after declaration of candidacy, nominating petition, or declaration of intent to be a write-in is filed.

The Comm. Here to Elect Rob Felber campaign committee established for the candidacy of
(Committee's name, if applicable) Township City School District
Robert Felber who is running for the office of 2-B Board of Education
(Candidate's name) (Office sought)

to appear on the ballot in the year _____ states the office sought is:

(Choose one applicable option)

___ a municipal office that pays an annual amount of compensation of five thousand dollars or less;

a member of a board of education except member of the state board of education; or

___ township trustee or township clerk.

The undersigned attests that the campaign committee will not accept total aggregate contributions that exceed two thousand dollars from all contributors nor more than one hundred dollars from any single individual contributor and will not make total expenditures in excess of two thousand dollars during any election period. Therefore the committee is not required to file any campaign finance reports otherwise required to be filed by R.C. 3517.10(A).

If the committee exceeds these limits, the committee is responsible to report all contributions received and expenditures made from the time the candidate filed the candidacy petition on the next required finance statement to be filed under R.C. 3517.10(A).

This statement made under the penalty of election falsification. Whoever commits election falsification is guilty of a felony of the fifth degree.

Robert Felber
Print Treasurer's or Deputy Treasurer's Name

Robert Felber
Treasurer's or Deputy Treasurer's Signature

8/7/17
Date

2017 AUG - 7 PM 12: 39
AKRON, OHIO

#1200 RBS