



2019 FEB -5 AM 11:10

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 FRIENDS OF MIKE MADONIO			PAC # (if Updated)	
Street Address 1958 CHERRYWOOD LANE		City AKRON	State OH	Zip 44312
Telephone 330-784-8445		Email madonmi@yahoo.com		
Treasurer JOSH WILLIAMS		Telephone 330-329-4294	Email Jwilli1121@gmail.com	
Street Address 5073 MISTY GLEN RD		City RAVENNA	State OH	Zip 44266
Deputy Treasurer (if any) KRISTIN WILLIAMS		Telephone 330-329-1259	Email Kwilliams1259@yahoo.com	
Street Address 5073 MISTY GLEN RD		City RAVENNA	State OH	Zip 44266

Candidate Committees Only

Full Name of Candidate MICHAEL MADONIO		Email madonmi@yahoo.com		
Street Address 1958 CHERRYWOOD LANE		City AKRON	State OH	Zip 44312
Office Sought AKRON CITY COUNCIL	Subdivision/District WARD 6	Party Affiliation/Independent/Non-Partisan DEMOCRAT	Election Year 2019	

Political Action Committees Only

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 type="radio"/> Yes <input type="radio"/> No	PACs and PCEs Only	List any Affiliated PACs/PCEs

	01/30/2019 Date (MM/DD/YYYY)	Michael Madonio Signature of Candidate if Candidate Committee	01-30-2019 Date (MM/DD/YYYY)
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Instructions for Designation of Treasurer (DOT) Form 30-D

This form must be filed before a candidate campaign committee, political action committee (PAC), political contributing entity (PCE), legislative campaign fund or political party makes any expenditures or receives any contributions, pursuant to R.C. 3517.10(D), and acts as the official registration document for the committee. In addition, is also used to update any information related to the original designation, such as the address information, name of the committee, office sought, or to appoint a new treasurer or deputy treasurer.

For an original designation of treasurer, please select NEW. To update an existing committee's designation of treasurer, please select UPDATE, and choose which item(s) that is being updated. For all filings, please select the type of committee. **This form should be completed in its entirety each time it is submitted.**

All Committees

On an original designation, complete this with the name of the committee. Pursuant to RC 3517.10(D), the name of a campaign committee shall include at least the last name of the campaign committee's candidate. If there are two or more beneficiaries of a single campaign committee, the name shall include the last name of each candidate beneficiary. Sponsored PACs shall include the name of the sponsoring organization, or a clearly recognized abbreviation or acronym by which the sponsoring organization is commonly known, pursuant to OAC 111:2-1-04. A political party should distinguish the type of account being registered by adding the account type after the political party name (e.g. *XYZ Party Restricted Fund*).

For an update that is changing the committee name, this field should be completed with the **updated** name of the committee. In addition, please indicate the prior committee name in the appropriate field above.

The PAC registration number field should only be completed for **updated** filings of statewide PACs, where a PAC registration has been assigned by the Secretary of State's office.

List the address of the campaign committee and any email address that should be associated with the committee. If the committee files reports electronically, the email address will be used to transmit electronic filing information from the examining authority.

Include the full name and address of the treasurer. RC 3517.081 allows the committee to appoint a deputy treasurer. Include the full name and address of the deputy treasurer, if applicable.

A complete **street address** must be provided in each required address field. A post office box may be provided in addition to, but not in lieu of, the required street address. (R.C. 3517.10(F)).

Candidate Campaign Committee

This section should be completed by candidate campaign committees only. List the full name and address of the candidate. Also list the party affiliation, office sought and district/subdivision for that office.

Political Action Committees

This section should be completed by PACs only. If this is a ballot issue PAC, please list the ballot issue. If this PAC is sponsored by a labor organization, corporation or other business entity, please list the sponsoring organization, and any acronym used.

PACs and PCEs

This section should list any affiliated PACs and/or PCEs.

Signature

This form should be signed by the treasurer or deputy treasurer when submitted.

If this form is being submitted by a candidate campaign committee, the candidate should sign in the designated space. If the form is being submitted by a PAC, PCE or political party, any authorized person may sign in the designated space.