

# Designation of Treasurer

Prescribed by Secretary of State 03/05

| All Committees   |                                  |  |  |
|--|----------------------------------|--|--|
| Full Name of Committee<br>committee to vote NO on 19820  |                                  |  |  |
| Street Address<br>3191 neille Ln   | Telephone Number<br>216 598 3168 | e-mail Address<br>helenannconway@hotmail.com |  |
| City<br>Twinsburg  | State<br>OH                      | Zip Code<br>44087                            | FAX Number   |
| Full Name of Treasurer<br>Helenann Conway  |                                  |  |  |
| Street Address<br>3191 neille Ln   | Telephone Number<br>216 598 3168 | e-mail Address<br>helenannconway@hotmail.com |  |
| City<br>Twinsburg  | State<br>OH                      | Zip Code<br>44087                            | 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                                     | Election Year  |
| Signature of Candidate   |                                  |  | Date   |
| Political Action Committees Only   |                                  |  |  |
| Is the PAC sponsored by a labor organization or corporation?<br><input checked="" 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 or Legislative Campaign Funds Only   |                                  |  |  |
| Authorized Signature   |                                  | Date   | Ballot Issue PAC?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

Signature of Treasurer: Helenann Conway

Date: 5/3/07

- 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: \_\_\_\_\_

07 MAY -3 AM 11:19  
 SUMMIT COUNTY  
 BOARD OF ELECTIONS  
 AKRON OHIO 44311