30-D
R.C. 3517.10

Designation of Treasurer

Prescribed by Secretary of State 07/05

All Committees

Full Name of Committee			
Friends of Tallmadge Fire & EMS			
Street Address	Telephone Number		e-mail Address
189 Lindsey Road	(330) 352-2722		Thechief0205@aol.com
City	State	Zip Code	FAX Number
Munroe Falls	OH	44262	

Full Name of Treasurer			
Dennis M. Crossen Sr.			
Street Address	Telephone Number		e-mail Address
189 Lindsey Road	(330) 352-2722		Thechief0205@aol.com
City	State	Zip Code	FAX Number
Munroe Falls	OH	44262	

Full Name of Deputy Treasurer (if any)			
N/A			
Street Address	Telephone Number		e-mail Address
City	State	Zip Code	FAX Number
	OH		

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
	OH		
Signature of Candidate			Date

Political Action Committees Only

Is the PAC sponsored by a labor organization or corporation? ☒ No ☐ 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?
		☒ Yes ☐ No

Signature of Treasurer

09-26-07
Date

07 SEP 27 AM 11:04
SUMMIT COUNTY
BOARD OF ELECTIONS
AKRON, OHIO

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: _____