



Designation of Treasurer

Form 30-D
ORC 3517.10

2019 MAR 11 PM 1:42

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 Hamilton Twp				PAC # (if Updated) NA	
Street Address 6065 Lockbourne Rd		City Lockbourne	State OH	Zip 43137	
Telephone 611-325-3950		Email MikeCraighow@gmail.com			
Treasurer Mike Craighow		Telephone 611 325 3950		Email MikeCraighow@gmail.com	
Street Address 6065 Lockbourne Rd		City Lockbourne	State OH	Zip 43137	
Deputy Treasurer (if any) NA		Telephone		Email	
Street Address		City	State	Zip	

Candidate Committees Only

Full Name of Candidate		Email			
Street Address		City	State	Zip	
Office Sought	Subdivision/District		Party Affiliation/Independent/Non-Partisan		Election Year

Political Action Committees Only

PAC is sponsored by: <input type="radio"/> Labor Organization <input type="radio"/> Corporation <input checked="" 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 checked="" type="radio"/> Yes <input type="radio"/> No	PACs and PCEs Only List any Affiliated PACs/PCEs	

Signature of Treasurer or Deputy Treasurer [Signature]	Date (MM/DD/YYYY) 3-11-2019	Signature of Candidate if Candidate Committee	Date (MM/DD/YYYY)
--	---------------------------------------	---	-------------------