





Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

WILLIAM K KAUFMAN

Mailing Address

836 CLAYMORE CT

[Empty grid lines for address]

TIPP CITY

OH

45371

Title or Position

CITY

STATE

ZIP CODE

Bookkeeper

Telephone number

937-335-6324

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

WILLIAM K KAUFMAN

Mailing Address

836 CLAYMORE CT

[Empty grid lines for address]

TIPPA CITY

OH

45371

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

937-335-6324

UNFOUNDED : NO : NO : INFORMATION

Full Name of Designated Agent

Ruth Ann George

Mailing Address

4554 Peters Rd

Tripp

CITY

OH

STATE

45373

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

937-667-0259

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

PNC Bank

Mailing Address

North Plaza Shopping Center

970 W Main St

Tripp City

CITY

OH

STATE

45371

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

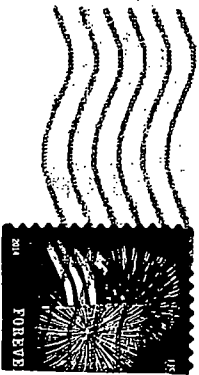
ZIP CODE

20090808 10:00:00 AM

Scott P. George  
4554 Peters Rd.  
Troy, OH 45373

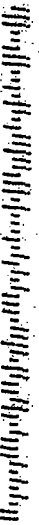
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