



Officeholder Information				
Full Name of Officeholder			Office to which Elected or Appointed	
Election Date (MM/DD/YYYY)	Municipality/Subdivision/District		County(ies) in which Office is Located/Statewide	
Street Address		City	State	Zip

Treasurer Information			
Treasurer		Telephone	Email
Street Address		City	State Zip

Is this an amended filing: **NO** **YES**

If YES, reason for amendment:

Signature of Officeholder

Date (MM/DD/YYYY)

Signature of Treasurer

Date (MM/DD/YYYY)

Transition Fund Information: (ORC 3517.1014)
 This form is used to establish a transition fund and designate its treasurer pursuant to ORC 3517.1014. A transition fund is separate and distinct from any campaign committee a candidate or officeholder may have in existence.

A transition fund is established to receive donations and to pay costs incurred for the transition activities and inaugural celebrations. Donations and disbursements may be made from a transition fund only during the fund's existence.

The dates for establishing, filing, reports for, and terminating a transition fund are prescribed by ORC 3517.1014. Please see that section for more detailed information relating to transition funds.