

SPECIAL INSTRUCTIONS FOR PETITIONERS:

THIS SHEET MUST BE SENT TO THE OHIO DIVISION OF LIQUOR CONTROL FOR ALL QUESTIONS ON FORMS 5A, 5C, 5D, 5E, 5P, 5Q AND 5T

Revised Code Sections 4301.33, 4301.332 and 4305.14

THIS INFORMATION MUST BE RECEIVED BY THE OHIO DIVISION OF LIQUOR CONTROL NO LATER THAN

_____, _____, _____
(Month) (Day) (Year)

MAIL OR DELIVER TO:

Ohio Department of Commerce
Division of Liquor Control
ATTN: PERMIT DIVISION
6606 Tussing Road
P. O. Box 4005
Reynoldsburg, Ohio 43068-9005

PETITION FILING DEADLINE: _____, _____, _____
(Month) (Day) (Year)

DATE OF ELECTION: _____, _____, _____
(Month) (Day) (Year)

QUESTION(S) TO BE PRESENTED TO ELECTORS:

(Form #) (Question(s))

Precinct Name: _____, _____, _____
(Name) (City/Village/Township) (County)

Please return the permit holder information to:

(Name of Petitioner)

(Street and Number or Rural Route)

(City or Village, State and Zip Code)

(Area Code, Phone Number)