

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)



**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

**OFFICE USE ONLY**

**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate (in this order: First, Middle, Last)**

Frank NMI Mancinelli

**3. Address (include post office box or street, city, state, zip code)**

6620 Lake Drive  
Callaway, Fl. 32404

**4. Telephone**

(850 ) 5965445

**5. E-mail address**

fmanci6620@comcast.net

**6. Office sought (include district, circuit, group number)**

Commissior Ward IV *Callaway Fl*

**7. If a candidate for a nonpartisan office, check if applicable:**

My intent is to run as a Write-In candidate.

**8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a**

Write-In     No Party Affiliation     \_\_\_\_\_ Party candidate.

**9. I have appointed the following person to act as my**  Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

*Frank Mancinelli*

**11. Mailing Address**

*6620 LAKE DRIVE*

**12. Telephone**

*(850) 596 5445*

**13. City**

*CALLAWAY*

**14. County**

*BAY*

**15. State**

*FL*

**16. Zip Code**

*32404*

**17. E-mail address**

*fmanci6620@comcast.net*

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

*Regions*

**20. Address**

*730 N. TYNDALL PKWY*

**21. City**

*PANAMA City*

**22. County**

*BAY*

**23. State**

*FL*

**24. Zip Code**

*32404*

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

*FEB 12 2020*

**26. Signature of Candidate**

*X Frank Mancinelli*

**27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)**

*FRANK Mancinelli*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

*Frank Mancinelli FEB 12 2020 X Frank Mancinelli*

BAY COUNTY FLORIDA