

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

SEP 23 2020

CITRUS COUNTY  
ELECTIONS

**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)

*Timothy Ray Langer*

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

[REDACTED]

**4. Telephone**

**5. E-mail address**

*(352) 634-4263*

*tlanger@tampabay.rr.com*

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

*Mosquito Control Board #2*

**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**

*Timothy Ray Langer*

**11. Mailing Address**

**12. Telephone**

*(352) 634-4263*

**13. City**

**14. County**

**15. State**

**16. Zip Code**

**17. E-mail address**

*[REDACTED]* *tlanger@tampabay.rr.com*

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

**19. Name of Bank**

*Cadence Bank*

**20. Address**

*301 U.S. Highway 415*

**21. City**

**22. County**

**23. State**

**24. Zip Code**

*INVERNESS*

*Citrus*

*FL*

*34450*

**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**

*9-23-2020*

**26. Signature of Candidate**

*X [Signature]*

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

I, *Timothy R. Langer*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer    ☐ Deputy Treasurer.

*9-23-2020*  
Date

*X [Signature]*  
Signature of Campaign Treasurer or Deputy Treasurer