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.

RECEIVED

JUN 0 1 2020

CITRUS COUNTY ELECTIONS

officer before opening the campaign account.			OFFICE USE ONLY					
1. CHECK APPROPRIATE BOX(ES):								
	g to Change:	Treasu	urer/Deputy [Deposito	ory 🔲	Office		Party
2. Name of Candidate (in this order: First, Middle, Last)			3. Address (include post office box or street, city, state, zip code) Po. 130x 153					
(Homas). Corkery								
. Telephone 5. E-mail address			HIBRIANDO, FL. 31142					
(352)422-8077 TIPE19	e m							
6. Office sought (include district, circuit, group number)			7. If a candidate for a <u>nonpartisan</u> office, check if					
C30/0/ / Cammiss/0/0 13/15/3			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	LICAN		Ра	rty cand	date			
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer								
10. Name of Treasurer or Deputy Treasurer								
Mary ann Kapinos								
11. Mailing Address N. Baswall TERK			12. Telephone					
			(352 H22-2128					
	14. County 15. Star		The state of the s					
10. I have design at a late C. H. C.								
18. I have designated the following bank as my			Primary Depository Secondary Depository					
			0. Address 1525 N. Forest Ridge Blvd					
21. City 22. County.		125	23 N. F	orest	Kidg	EBI	V Cl	
1-ternando	CHRUS		23. State	, _		24. Zip Coo 3444	e /2	
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	Signature of Can	didate -						
/ / 2020			Chomos of ordory					
27. Treasurer's Acceptance of Appointment (fill in the blanks and clieck the appropriate block)								
1 Mary Ony Karpinios								
, do hereby accept the appointment (Please Print or Type Name)								
designated above as: Campaign Treasurer Deputy Treasurer.								
6.1.2020 X/May (1) A com								
Date Signature of Campaign Treasurer or Deputy Treasurer								