

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

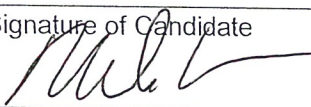
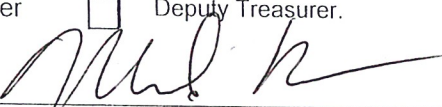
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

Rec'd 2020AUG17PM04:15

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

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES): <input checked="" type="checkbox"/> Initial Filing of Form Re-filing to Change: <input type="checkbox"/> Treasurer/Deputy <input type="checkbox"/> Depository <input type="checkbox"/> Office <input type="checkbox"/> Party					
2. Name of Candidate (in this order: First, Middle, Last) <u>Mike Bruno</u>			3. Address (include post office box or street, city, state, zip code) <u>1910 Vista Lakes Dr</u> <u>Fleming Island, FL 32003</u>		
4. Telephone <u>(904) 434-7951</u>		5. E-mail address <u>mmventures@afl.net</u>			
6. Office sought (include district, circuit, group number) <u>Crossings at Fleming Island</u> <u>CDD Seat 1</u>			7. If a candidate for a <u>nonpartisan</u> office, check if applicable: <input type="checkbox"/> My intent is to run as a Write-In candidate.		
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a <input type="checkbox"/> Write-In <input type="checkbox"/> No Party Affiliation <input type="checkbox"/> _____ Party candidate.					
9. I have appointed the following person to act as my <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer					
10. Name of Treasurer or Deputy Treasurer <u>Mike Bruno</u>					
11. Mailing Address <u>1910 Vista Lakes Dr</u>				12. Telephone <u>(904) 434-7951</u>	
13. City <u>Fleming Island</u>		14. County <u>Clay</u>		15. State <u>FL</u>	
		16. Zip Code <u>32003</u>		17. E-mail address <u>mmventures@afl.net</u>	
18. I have designated the following bank as my <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository					
19. Name of Bank <u>Bank of America</u>			20. Address <u>5000 US 17-S Unit 75</u>		
21. City <u>Fleming Island</u>		22. County <u>Clay</u>		23. State <u>FL</u>	
		24. Zip Code <u>32003</u>			
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 <u>8/17/20</u>			26. Signature of Candidate <u>X</u> 		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) I, <u>Mike Bruno</u> , do hereby accept the appointment (Please Print or Type Name) designated above as: <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer. <u>8/17/20</u> <u>X</u>  Date Signature of Campaign Treasurer or Deputy Treasurer					