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 th	e campaign account.						OFFICE	USE	ONLY	
1. CHECK APPROPRIATE Initial Filing of Form	E BOX(ES): Re-filing to Change	: 🔀 Trea	asurer/Deput	у [☐ Deposito	ry 🔲	Office		Party	
2. Name of Candidate (in	3. Address (include post office box or street, city, state, zip									
Gus Albert Guadagnino			code) 1539 Fayetteville Dr							
4. Telephone	5. E-mail address	Spring Hill FL 34609								
(352) 650 1512	GusGuadagnino@gr	mail.com								
6. Office sought (include district, circuit, group number) Hernando County School Board பிருக்கும் பு			7. If a candidate for a <u>nonpartisan</u> 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 Gus Guadagnino										
11. Mailing Address				12. Telephone						
1539 Fayetteville Dr 13. City 14. County 15. State				(352)650 1512						
13. City	14. County	16. Zip Code 17. E-mail address								
Spring Hill	Hernando County	34609 GusGuadagnino@gma					om			
18. I have designated the following bank as my										
				D. Address						
Capital City Bank+ 14302 Spring Hill Dr										
21. City	22. County	23.	23. State				24. Zip Code			
, Spring Hill	Hernando Co	Florida				34609				
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	I f	2€	3. Signature	of Car	ndidate /			****		
07/15/2019	7/(5/bus									
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
I, Gus Albert Guadagnino , do hereby accep						t the appoir	ntment	J		
(Please Print or Type Name)										
designated above as:	Campaign T	reasurer	Dep	uty Tre	easurer.					
07/15/2019 X										
Date	nature of Ca	ature of Campaign Treasurer or Deputy Treasurer								