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.

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officer before opening th		OFFICE USE ONLY						
1. CHECK APPROPRIATE	• •			~ r	ti		F	
Initial Filing of Form	Re-filing to Chang		Treasurer/		Depository	Offic		
2. Name of Candidate (in		, Last)	3. Ac		de post office box	x or street, c	ity, state, zip	
Michael Anthony Haza	ırd		1 -	,	on Palms Drive			
4. Telephone	5. E-mail address		Apt.		m amo bc			
(813) 750-9229	michael.hazard.co	michael.hazard.coo@gmail.c Brandon, FL 33511						
6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, cl							fice, check if	
Mayor Of Tampa				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 I	Party Affiliation		-3			_Party c	andidate.	
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🔲 Deputy Treasurer								
10. Name of Treasurer or D	•							
Lynntrenetta Evett Haz	ard							
11. Mailing Address					12. T	Telephone		
2109 Plantation Palms					(81	13) 638-4	4021	
13. City	14. County	15. Sta		. Zip Code	17. E-mail addre	ess		
Brandon	Hillsborough	FL	33	511	lynn_hazard_	_2004@ya	thoo.com	
18. I have designated the following bank as my								
19. Name of Bank			20. Addr					
GTE Federal Credit Uni			1209 W	. MLK Blv				
21. City	,			23. State		24. Zip	•	
Seffner	Hillsborougi	<u>h</u>		FL		33511		
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 26. Signature of Candidate								
03/19/2017				X Mullell AS (arx)				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)								
I,, do hereby accept the appointment							pointment	
	(Please Print or Type	Name)			_			

Deputy Treasurer.

Signature of Campaign Treasurer or Deputy Treasurer

designated above as:

X

03/19/2017 Date Campaign Treasurer