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

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

(PLEASE PRINT OR TYPE)

RECD SUE FEB 28/18 pm 1/88

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
1 <u> </u>	reasurer/Deputy 🔲 Depository 📋 Office 🔲 Party
2. Name of Candidate (in this order: First, Middle, Last)  A. Telephone  5. E-mail address 1N FO & TAMPA, FC. 33511  (8/3) 750 9339 MICHAELFOR MAYOR, ONG.	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
MAYOR OF TAMPA	applicable:  My intent is to run as a Write-In candidate.
8. <b>If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable:</b> 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  MCHAEL HI HAZARD  11. Mailing Address  12. Telephone  (8/3) 750-9229	
13. City 14. County 15. State 16. Zip Code 17. E-mail address /NFO a	
TAMPA IHUSBORGER TO	( 33610 MICHAELFOR MAYOR 2019. ONG
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank 20. Address 20. E. KENNEDY BUD	
21. City 22. County	23. State 24. Zip Code 3 3 6 0 2
TAMPA HULSBUROU	GH PC 3560X
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
2-28-208	x Millar Hittesten
7. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1. MCHAEL A HAZHO , do hereby accept the appointment (Please Print or Type Name)	
designated above as:   Campaign Treasurer Deputy Treasurer	
2-28-2018  Date  X  Signature of Campaign Treasurer/or Deputy Treasurer	