

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

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

JAN 09 2018

(PLEASE PRINT OR TYPE)

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

**OFFICE USE ONLY**

**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate** (in this order: First, Middle, Last)

C. Todd Marks

**3. Address** (include post office box or street, city, state, zip code)

12029 Whitmarsh Lane  
Tampa, FL 33626

**4. Telephone**

(813 ) 494-2533

**5. E-mail address**

Todd@toddmarks.com

**6. Office sought** (include district, circuit, group number)

Hillsborough County Commission, District 1

**7. If a candidate for a nonpartisan 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     Republican    Party candidate.

**9. I have appointed the following person to act as my**     Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Michael Millner

**11. Mailing Address**

2055 NW Diamond Creek Way

**12. Telephone**

( 772 ) 261-8100

**13. City**

Jensen Beach

**14. County**

Martin

**15. State**

Florida

**16. Zip Code**

34957

**17. E-mail address**

mike@politicalaccountinggroup.com

**18. I have designated the following bank as my**     Primary Depository     Secondary Depository

**19. Name of Bank**

SunTrust Bank

**20. Address**

111 SE Osceola Street

**21. City**

Stuart

**22. County**

Martin

**23. State**

Florida

**24. Zip Code**

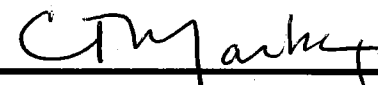
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**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

1/08/18

**26. Signature of Candidate**

**X** 

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

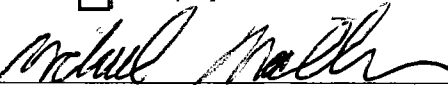
I, Michael Millner, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

1/05/18

Date

**X**



Signature of Campaign Treasurer or Deputy Treasurer