APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

RECD SOE JAN 31 18 PM 4/25

| NOTE: This form must be on file with the qualifying officer before opening the campaign account. | | | | | | | | ٠ | | OFFICI | E USE | ONLY | |
|--|--------------------|-------------------|---------|---------|---|-----------|-------------------|--------|---------|--------------|--------|-------|--|
| 1. CHECK APPROPRIATE BOX(ES): | | | | | | | | | | | | | |
| ☐ Initial Filing of Form | Re | -filing to Change | : 🔀 T | reasure | er/Deputy | |] Deposito | ory | | Office | | Party | |
| 2. Name of Candidate (in this order: First, Middle, Last) | | | | | | includ | de post offic | ce box | x or st | reet, city, | state, | zip | |
| CHRISTOPHER "TOPHER" V MULL MORRUSON | | | | | code) 808 N. FRANKLIN ST. # 2712 | | | | | | | | |
| 4. Telephone | 5. E-ma | ail address | | | TANA, FL 33602 | | | | | | | | |
| (813)857-8638 | | | | | | | | | | | | | |
| 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. 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 AffiliationParty candidate. | | | | | | | | | | | | | |
| 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer | | | | | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer | | | | | | | | | | | | | |
| CHRISTOPHER MORRISON | | | | | | | | | | | | | |
| 11. Mailing Address 12. Telephone | | | | | | | | | | | | | |
| 808 N. FRANKLIN ST. #2712 | | | | | (B13) 857-863B | | | | | | | | |
| 13. City | 14. County 15. Sta | | | - 1 | | | | | | | | | |
| TARA HILLSBOROUGH FL | | | | | 33602 topher@tophermorrison.com | | | | | | | | |
| 18. I have designated the following bank as my | | | | | | | | | | | | | |
| 19. Name of Bank | | | | | 20. Address | | | | | | | | |
| Syriours BAIK | | | | | 333 3RD AVE N. | | | | | | | | |
| 21. City 22. County | | | | | 23. 8 | 23. State | | | | 24. Zip Code | | | |
| St. KETASISURG PINKLERS | | | | | <u>FL</u> | | | | | 33701 | | | |
| 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 Clandidate 1/22/18 | | | | | | | | | | | | | |
| 27. / // Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | | | | | |
| I, CHRISTOPHON "TOTHEN" MONNESON , do hereby accept the appointment | | | | | | | | | | | | | |
| (Please Print or Type Name) | | | | | | | | | | | | | |
| designated above as: | |] Campaign T | reasu/e | r // 🛭 | 【 Jepu | ty Tre | asurer. | | | | | | |
| 1/22/18 X XW | | | | | | | | | | | | | |
| Date Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | | | | | | | |

DS-DE 9 (Rev. 10/10)

Rule 1S-2.0001, F.A.C.