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

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

(PLEASE PRINT OR TYPE)

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NOTE: This form must be on file with the qualifying officer before opening the campaign account.												OFFICE USE ONLY		
1. CHECK APPROPRIATE BOX(ES):														
	reasurer/Deputy Depository Office Party													
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip									
Ed Turanchik					code) 120 S Krental Ave									
4. Telephone	4. Telephone 5. E-mail address					Tampa, FL 33609								
(813 ) 477-2847	Ed@Edf	orMayor.co	m											
6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office											e, che	k if		
Tampa Mayor					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 Affilia	ation 🔲								_ Par	ty can	didate.		
9. I have appointed the fo	llowing pe	erson to act a	s my	X	Cam	npaign Tr	reası	urer [	] [	Deputy	/ Treasur	ər		
10. Name of Treasurer or I	Deputy Trea	asurer							18					
Tom Alte										====				
11. Mailing Address						12. Telephone								
PO Box 16061					(217) 257-6998									
13. City 14. County				ate	16. Zip Code 33733		е	17. E-mail address						
St. Petersburg Pinellas FL							Т	Tom@BlueTicketConsulting.com						
18. I have designated the following bank as my											۸			
19. Name of Bank					20. Address									
Regions Bank					407 E Kennedy Blvd									
21. City				23. State						- 1	24. Zip Code			
Tampa	-	lillsborough	-	- Copie III also		FL					33602			
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								
2/2/18					X I / us anchi									
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)														
I,, do hereby accept the appointment														
(Please Print or Type Name)														
designated above as:		Campaign 7	Treasure:	r		Deputy <sup>-</sup>	Treas	surer.		1				
1/29/18 X 2 Tom Aff														
Date Signature of Campaign Treasurer or Deputy Treasurer														