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):	
Initial Filing of Form Re-filing to Change: T	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
Vibha Dhawan Shevade	code) 19325 Autumn Woods Ave
4. Telephone 5. E-mail address	Tampa, FL 33647
813 1789-5555 Contact vibha@gnalleam	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
City Council District 3	applicable: My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: 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	
Kamal Nijhawan 11. Mailing Address	12 Tolophono
•	12. Telephone
13. City 14. County 15. Sta	ate 16. Zip Code 17. E-mail address
	- 33626 Kanal
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank 20. Address	
Wells targe	8982 Regents Park, Dr 23. State 24. Zip Code
21. City 22. County Tampa 22. County Hillsborow	23. State 24. Zip Code 336.47
	E 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
09-8-18	X Vibha Shevad
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
1, Kamal Nijhawan	, do hereby accept the appointment
(Please Print or Type Name)	
designated above as: Campaign Treasurer Deputy Treasurer.	
09/08/18 X	Me -
	Signature of Campaign Treasurer or Deputy Treasurer