

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

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

(PLEASE PRINT OR TYPE)

REC'D SOE MAY 28 '19 AM 10:32

**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)

Bob "Coach" Henriquez

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

1802 W. Erna Drive  
Tampa, FL 33603

**4. Telephone**

(813 ) 546-5330

**5. E-mail address**

vote4coach@gmail.com

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

Hillsborough County Property Appraiser

**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    ☒ Democratic Party candidate.

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

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

Tommy Gucciardo

**11. Mailing Address**

1106 North Franklin Street

**12. Telephone**

( 813 ) 226-6091

**13. City**

Tampa

**14. County**

Hillsborough

**15. State**

FL

**16. Zip Code**

33602

**17. E-mail address**

tgucciardo@pridacps.com

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

**19. Name of Bank**

Florida West Coast Credit Union

**20. Address**

601 E. Kennedy BLVD.

**21. City**

Tampa

**22. County**

Hillsborough

**23. State**

FL

**24. Zip Code**

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**

03/07/2019

**26. Signature of Candidate**

**X** Robert K. Henriquez

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

I, THOMAS GUCCIARDO, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer    ☐ Deputy Treasurer.

2/28/19  
Date

**X**

[Signature]  
Signature of Campaign Treasurer or Deputy Treasurer