

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

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

(PLEASE PRINT OR TYPE)

REC'D SOE NOV 14 '19 AM 10:58

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)

Henry Collins Washington Sr

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

1204 North Willow Ave
Tampa, FL 33607

4. Telephone

(813) 404-3078

5. E-mail address

henry.washington1968@gma

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

Hillsborough County School Board District 5

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 ☐ _____ Party candidate.

9. I have appointed the following person to act as my

☒ Campaign Treasurer ☐ Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Michelle N. McKinney

11. Mailing Address

P.O. Box 75871

12. Telephone

(321) 917-8423

13. City

Tampa

14. County

Hillsborough

15. State

FL

16. Zip Code

33675

17. E-mail address

mmckinney_yes@yahoo.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

T. D. Bank

20. Address

9400 North 56th Street

21. City

Temple Terrace

22. County

Hillsborough

23. State

FL

24. Zip Code

33617

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

November 14, 2019

26. Signature of Candidate

☒ 

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

I, Michelle N McKinney, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

11/14/19

Date

☒ 

Signature of Campaign Treasurer or Deputy Treasurer