RECU SOE FEB 7"20 9M1052

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

officer before opening the campaign account.				OFFICE USE ONLY						
CHECK APPROPRIATE Initial Filing of Form	BOX(ES): Re-filing to Change:	· 🔯 Tre	easurer/l	Deputv l͡ᢅx	Deposito	rv 🗀	Office		Party	
								ototo	-	
Name of Candidate (in this order: First, Middle, Last) Selena A. Ward			Address (include post office box or street, city, state, zip code) PO BOX 45101							
4. Telephone	5. E-mail address	5. E-mail address			Tampa, FL 33677					
(813) 444-5872	selenaward2020@gr		1							
Office sought (include district, circuit, group number) School Board, District 5 Hillsborough County				7. If a candidate for a <u>nonpartisan</u> 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					Pa	arty cand	lidate.		
9. I have appointed the following person to act as my Campaign Treasurer 🔀 Deputy Treasurer										
10. Name of Treasurer or Deputy Treasurer Selena Ward										
11. Mailing Address				12. Telephone						
PO BOX 45101	•				·	(813) 444-587	' 2		
13. City Tampa	14. County Hillsborough	· 1			16. Zip Code 17. E-mail address selenaward2020@gmail.com					
18. I have designated the following bank as my				Primary Depository Secondary Depository						
				20. Address						
				933 Hillsborough Avenue						
21. City	22. County			23. State	7 11 011 40		24. Zip Co			
Tampa	Hillsborough			FL			33610	,40		
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 2				26. Signature of Candidate						
2/7/20				x Selena Ward						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
I, Sclena Ward (Please Print or Type Name)				, do hereby accept the appointment						
designated above as: Campaign Treasurer Deputy Treasurer.										
2/7/20 X Selena Ward										
Date Signature of Campaign Treasurer or Deputy Treasurer										