

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

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

(PLEASE PRINT OR TYPE)

REC'D SOE JUN 1 '20 PM 5:14

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)

RICHARD CARLTON WARRENER

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

19632 LAKE OSCEOLA LANE  
ODESSA, FL. 33556

**4. Telephone**

(813) 494-4183

**5. E-mail address**

RICHARDWARRENER@GMAIL.COM

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

SCHOOL BOARD - DISTRICT 3

**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**

RICHARD CARLTON WARRENER

**11. Mailing Address**

19632 LAKE OSCEOLA LANE

**12. Telephone**

(813) 494-4183

**13. City**

ODESSA

**14. County**

HILLSBOROUGH

**15. State**

FL

**16. Zip Code**

33556

**17. E-mail address**

RICHARDWARRENER@GMAIL.COM

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

**19. Name of Bank**

BANK OZK

**20. Address**

14799 N. DALE MABRY HWY

**21. City**

TAMPA

**22. County**

HILLSBOROUGH

**23. State**

FLORIDA

**24. Zip Code**

33618

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**

JUNE 1, 2020

**26. Signature of Candidate**

X Richard C. Warrenner

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

I, RICHARD C. WARRENER, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer    ☐ Deputy Treasurer.

JUNE 1, 2020

Date

X Richard C. Warrenner

Signature of Campaign Treasurer or Deputy Treasurer