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

RECU SUE JUN 11 20 pm 1:47

| officer before opening the campaign account. | | | OFFICE USE ONLY | | | | | | | | |
|--|---|----------|--|--|--------|--------|-------|--------------|-------|-------|--|
| 1. CHECK APPROPRIATE BOX(ES): | | | | | | | | | | | |
| Initial Filing of Form Re-filing | g to Change: | <u> </u> | reasur | er/Deputy | Depos | sitory | | Office | | Party | |
| 2. Name of Candidate (in this order: Fir | 3. Address (include post office box or street, city, state, zip | | | | | | | | | | |
| Daniel Joseph Wolnik | | | code) 11014 Tahiti Isle Lane | | | | | | | | |
| 4. Telephone 5. E-mail address | | | Tampa FL 33647 | | | | | | | | |
| (407) 557-5245 djwolnik@g | gmail.com | | | | | | | | | | |
| 6. Office sought (include district, circuit, group number) | | | 7. If a candidate for a nonpartisan office, check if | | | | | | | | |
| Supervisor, Cory Lakes CDD, Seat #3 | | | 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 | on 🔲 | | | | | | Party | candi | date. | | |
| 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer | | | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer | | | | | | | | | | | |
| Tammy Wolnik | | | | | | | | | | | |
| 11. Mailing Address | | | | 12. Telephone | | | | | | | |
| 11014 Tahiti Isle Lane | | | (40 | 7)5 | 57-524 | 5 | | | | | |
| 13. City 14. Count | 14. County 15. S | | , | | | | | | | | |
| Tampa Hillsboro | pa Hillsborough FL | | | 33647 djwolnik@gmail.com | | | | | | | |
| 18. I have designated the following bank as my Primary Depository Secondary Depository | | | | | | | | | | | |
| 19. Name of Bank | | | 20. Address | | | | | | | | |
| Navy Federal Credit Union | | | 3723 S. Highway 301 | | | | | | | | |
| 21. City 22. County | | | 23. State | | | | | 24. Zip Code | | | |
| Riverview Hillsborough | | | FL | | | | | 33578 | | | |
| 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 26. Signature of Candidate | | | | | | | | | | | |
| 06/09/2020 | | | | X samely Wolf | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | | | |
| I,, do hereby accept the appointment | | | | | | | | | | | |
| (Please Print or Type Name) | | | | | | | | | | | |
| designated above as: Campaign Treasurer Deputy Treasurer. | | | | | | | | | | | |
| 06/09/2020 X T Y W W W | | | | | | | | | | | |
| Date Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | | | | | |