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

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

'18JUL18AM1041 SOE Lee Co F1

(PLEASE PRINT OR TYPE)

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

**OFFICE USE ONLY** 

officer before opening the campaign account.	OFFICE USE UNLY						
1. CHECK APPROPRIATE BOX(ES):							
Initial Filing of Form Re-filing to Change: Tr	easurer/Deputy Depository Office Party						
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip						
JAMES PMURPHY	code) 24808 LAKEMONT COVELN # 102						
4. Telephone 5. E-mail address	BONITA SPRINGS, FL 34134						
(239)495-6475 HOTMALL. COM							
O Office a second disclosed disclosed singuity masses mount on	7. If a candidate for a <u>nonpartisan</u> office, check if						
BONITA SPRINGS FIRE CONTROL 4	applicable:						
RESCUE DISTRICT - COMMISSIQUER	My intent is to run as a Write-In candidate.						
8. If a candidate for a <u>partisan</u> office, check block and fill							
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							
BARRY W. SILVER							
11. Mailing Address	12. Telephone						
28387 Highgate Da.  13. City 14. County 15. Sta Bonita Springs Lee Fl.	(202) 9973783						
13. City 14. County 15. Sta							
Bonita Springs Lee Fl.	34135 barry wsilver organil, com						
18. I have designated the following bank as my	Primary Depository Secondary Depository						
19. Name of Bank	20. Address						
WELLS FARGO 21. City 22. County	9/50 BONITA BEACH RD SE  23. State  24. Zip Code  FL 3 4/3 5						
21. City 22. County	23. State 24. Zip Code						
BONITA SPRINGS LEE	FL 34/35						
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						
7/18/18	X James P. Mursky						
27. Treasurer's Acceptance of Appointment	(fill in the blanks and check the appropriate block)						
1. BARRY W. SOVER	, do hereby accept the appointment						
I. BARRY W. STVEN (Please Print or Type Name)	, , , , , , , , , , , , , , , , , , , ,						
designated above as:   Campaign Treasurer	Deputy Treasurer.						
July 18, 2018 X	(34. 1 (1)						
Date	Signature of Campaign/Treasurer or Deputy Treasurer						

## 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.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
Initial Filing of Form Re-filing to Change: 🔲	Treasurer/Deputy
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip
JAMES P. MURPHY	code) 24808 LAKEMONT COVE LN #102
4. Telephone 5. E-mail address	BONITA SPRINGS, FL 34134
(239) 495-6475WHOTMAIL COM	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
BONITAS PRINGS FIRE CONTROLLA RESEUR	Applicable:  My intent is to run as a Write-In candidate.
FIRE COMMISSIONER SEAT 1	
8. If a candidate for a <u>partisan</u> office, check block and fi	Il 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	
JAMES P. MURPHY	
11. Mailing Address	12. Telephone
24808 LAKE MONT COVE LANE # 10  13. City 14. County 15. S	12 (239)495-6475
BUNNASPRINGS LFE FL	- 77889 .com
	Primary Depository Secondary Depository
19. Name of Bank	20. Address
UELLSFARGO 21 City	9150 BONITA BEACHRD SE
21. City 22. County	23. State 24. Zip Code
BONITA SPRINGS LEE	FL 34/34
	HE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND RY AND THAT THE FACTS STATED IN IT ARE TRUE.
25. Date	26. Signature of Candidate
7/18/18	X James P Muspky
27. Treasurer's Acceptance of Appointment	nt (fill in the blanks and check the appropriate block)
I, JAMES P. MURPHY (Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasur	er Deputy Treasurer.
7/18/18 X	Charles P. Munokut
Date	Ignature of Campaign Treasurer or Deputy Treasurer

## STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

_	_		 _		_	_	_		 
0	FI	FI	⋤	ш	S	_	n	N	v

1, JAMES P. MURPHY
candidate for the office of BONITA SPRINGS FIRE CONTROL ARESCUE DIST.  FIRE COMMISSIONER
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.
X James P. Mussky 7-18-18 Signature of Candidate Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).