

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY

10JUN24PM02:45NEL Lee Co PA

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

ALEXANDER PETER GRANTT

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

11851 EAST TERRY STREET
OR P.O. BOX 1449 (ZIP 34133)
BONITA SPRINGS FLORIDA
34135

4. Telephone (optional)

(239) 947-4441

5. E-mail address (optional)

NONE

6. Office sought (include district, circuit, group number)
COMMISSIONER BONITA SPRINGS FIRE
CONTROL & RESCUE DISTRICT
SEAT THREE

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

ALEXANDER P. GRANTT

11. Mailing Address (If post office box or drawer, also include street address)

11851 EAST TERRY STREET P.O. Box 1449 ^{Bonita Springs 34133}

12. Telephone

(239) 947-4441

13. City

BONITA SPRING

14. County

LEE

15. State

FL

16. Zip Code

34135

17. E-mail address (optional)

NONE

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

19. Name of Bank

FIFTH THIRD BANK

20. Street Address

8800 West Terry Street

21. City

BONITA SPRINGS

22. County

LEE

23. State

FLORIDA

24. Zip Code

34135

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 23, 2010

26. Signature of Candidate

X Alexander Peter Grantt

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

I, ALEXANDER P. GRANTT, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6-23-2010

Date

X

Alexander P. Grantt
Signature of Campaign Treasurer or Deputy Treasurer

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AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

OFFICE USE ONLY

(PLEASE PRINT OR TYPE)

10JUN24PM02:49NE

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

ALEXANDER PETER GRANTT

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

11851 EAST TERRY STREET
OR P.O. Box 1449 (ZIP 34133)
BONITA SPRINGS, FLORIDA 34135

4. Telephone (optional)

(239) 947-4441

5. E-mail address (optional)

NONE

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

COMMISSIONER BONITA SPRINGS FIRE
CONTROL & RESCUE DISTRICT SEAT THREE

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

NEIL ARNAL

11. Mailing Address (If post office box or drawer, also include street address)

27670 MICKORY BLVD.

12. Telephone

(239) 390-0083

13. City

BONITA SPRINGS

14. County

LEE

15. State

FL

16. Zip Code

34134

17. E-mail address (optional)

arnals@msn.com

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

19. Name of Bank

FIFTH THIRD BANK

20. Street Address

8800 WEST TERRY STREET

21. City

BONITA SPRINGS

22. County

LEE

23. State

FLORIDA

24. Zip Code

34135

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 23, 2010

26. Signature of Candidate



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

I, NEIL ARNAL, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6-23-2010

Date



Signature of Campaign Treasurer or Deputy Treasurer