

**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

10 OCT 2010 10:58:35 AM EST

**1. CHECK APPROPRIATE BOX:**

Original Appointment      Change in:     Treasurer/Deputy     Depository     Office     Party

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

*TERRY P MILLER*

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

*2621 SW 29th  
CAPE CORAL, FL  
33914*

**4. Telephone** (optional)

*(239) 980-2224*

**5. E-mail address** (optional)

*TERRY.P.MILLER52@GMAIL.COM*

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

*Lee County Soil & Water Conservation Dist*  
*Seat 1*

**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**

*TERRY MILLER*

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

*2621 SW 29th FL*

**12. Telephone**

*(239) 980-2224*

**13. City**

*CAPE CORAL*

**14. County**

*LEE*

**15. State**

*FL*

**16. Zip Code**

*33914*

**17. E-mail address** (optional)

*TERRY.P.MILLER52@GMAIL.COM*

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

**19. Name of Bank**

*Bank of America*

**20. Street Address**

*6100 Whiskey Creek Dr.*

**21. City**

*SEAFORD*

**22. County**

*LEE*

**23. State**

*FL*

**24. Zip Code**

*33919*

**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**

*10/4/10*

**26. Signature of Candidate**

*[Signature]*

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

I, *TERRY MILLER*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

*10/4/10*  
Date

*[Signature]*  
Signature of Campaign Treasurer or Deputy Treasurer

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

**OFFICE USE ONLY**

(PLEASE PRINT OR TYPE)

**1. CHECK APPROPRIATE BOX:**

Original Appointment      Change in:     Treasurer/Deputy     Depository     Office     Party

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

TERRY PAUL MILLER JR

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

2621 SW 29th PL  
CAPE CORAL, FL  
33914

4. Telephone (optional)

(239) 980-2224

5. E-mail address (optional)

TERRY.MILLERJR@Gmail.com

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

LEE COUNTY SOIL AND WATER CONSERVATION  
District Seat 1

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

RAYMOND RODRIGUES

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

11401 WORLESTER RUN

12. Telephone

( )

13. City

ESTERO

14. County

LEE

15. State

FL

16. Zip Code

33928

17. E-mail address (optional)

RAYMOND.RODRIGUES@Yahoo.com

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

19. Name of Bank

BANK OF AMERICA

20. Street Address

6100 WHISKEY CREEK DR.

21. City

FT MYERS

22. County

LEE

23. State

FL

24. Zip Code

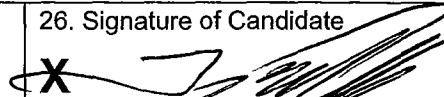
33919

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

10/2/10

26. Signature of Candidate



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

I, Raymond Rodrigues, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

10/2/10

Date



Signature of Campaign Treasurer or Deputy Treasurer