

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

SHARKEY, ROBERT H
26625 HICKORY BLVD
BONITA SPRINGS FL 34134

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

ROBERT H. SHARKEY 26625 HICKORY BLVD
BONITA SPRINGS, FL 34134

4. Telephone 5. E-mail address
(239) 405-0077 SHARKEYR.H@GMAIL.COM

6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable:
BONITA FIRE COMMISSIONER SEAT 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
MICHAEL S. GIBSON JR

11. Mailing Address 12. Telephone
PO BOX 2374 (239) 287-3648

13. City 14. County 15. State 16. Zip Code 17. E-mail address
BONITA SPRINGS LEE FL 34133 MGIBSONJR@GMAIL.COM

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

19. Name of Bank 20. Address
Sun Trust BONITA BAY BRANCH RT 41

21. City 22. County 23. State 24. Zip Code
BONITA SPRING FL LEE FL 34134

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
6-8-12 X Robert H Sharkey

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

I, MICHAEL S. GIBSON JR, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

6/8/12 Date X Signature of Campaign Treasurer or Deputy Treasurer

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

SHARKEY, ROBERT H 26625 HICKORY BLVD BONITA SPRINGS FL 34134

(PLEASE PRINT OR TYPE)

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

OFFICE USE ONLY

12 JUN 2012 10:08 AM STATE OF FL

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: [X] Treasurer/Deputy [ ] Depository [ ] Office [ ] Party

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

ROBERT H. SHARKEY

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

26625 HICKORY BLVD BONITA SPRINGS FL 34134

4. Telephone

(239) 405-0077

5. E-mail address

SHARKEY, R.H. @GMAIL.COM

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

BONITA SPRINGS FIN. COMMISSION SEAT 4

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 [X] Campaign Treasurer [X] Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

ROBERT SHARKEY

11. Mailing Address

26625 HICKORY BLVD, BONITA SPRINGS, FL (239) 405-0077

13. City

BONITA SPRINGS

14. County

LEE

15. State

FL

16. Zip Code

34134

17. E-mail address

sharkey R.H. @GMAIL.COM

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

19. Name of Bank

SUN TRUST

20. Address

BONITA BAY BRANCH RT 41

21. City

BONITA SPRINGS, FL

22. County

LEE

23. State

FL

24. Zip Code

34134

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

6-8-12

26. Signature of Candidate

[Signature]

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

I, ROBERT H SHARKEY, do hereby accept the appointment (Please Print or Type Name)

designated above as: [X] Campaign Treasurer [X] Deputy Treasurer.

6-8-12

Date

[X]

[Signature] Signature of Campaign Treasurer or Deputy Treasurer