

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2015 JAN 15 PM 11:17

CLERK OF SUPERIOR COURT

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)

SHIRLEY GROOVER BRYANT

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

2413 WATERFORD COURT
PALMETTO, FL 34221

4. Telephone

(941) 722-3860

5. E-mail address

sgbryant@grooverfamily.us

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

MAYOR - CITY OF PALMETTO

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

SHIRLEY GROOVER BRYANT

11. Mailing Address

2413 WATERFORD COURT

12. Telephone

(941) 722-3860

13. City

PALMETTO

14. County

MANATEE

15. State

FL

16. Zip Code

34221

17. E-mail address

sgbryant@grooverfamily.us

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

19. Name of Bank

BANK OF THE OZARKS

20. Address

501 8TH AVENUE WEST

21. City

PALMETTO

22. County

MANATEE

23. State

FL

24. Zip Code

34221

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

1/15/16

26. Signature of Candidate

X Shirley Groover Bryant

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

I, SHIRLEY GROOVER BRYANT, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

1/15/16

Date

X Shirley Groover Bryant
Signature of Campaign Treasurer or Deputy Treasurer