

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

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

(PLEASE PRINT OR TYPE)

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FLORIDA COUNTY
SUPERVISOR OF ELECTIONS

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)

Laurie Pearl Galle

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

807-67th Ave Ter. W.
Bradenton, FL 34207

4. Telephone

(941) 737-6480

5. E-mail address

laurieg3588@yahoo.com

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

County Commissioner Dist. # 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 Republican Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer (or Deputy Treasurer)

Laurie Galle

11. Mailing Address

807-67th Ave Ter. W.

12. Telephone

(941) 737-6480

13. City

Bradenton

14. County

Manatee

15. State

FL

16. Zip Code

34207

17. E-mail address

~~laurieg3588@yahoo.com~~ laurieg3588@yahoo.com

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

19. Name of Bank

Manatee County Federal Credit Union

20. Address

604-13th Ave E.

21. City

Bradenton

22. County

Manatee

23. State

FL

24. Zip Code

34208

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

5-24-17

26. Signature of Candidate

X

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

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

designated above as: Campaign Treasurer Deputy Treasurer.

5-24-17
Date

X
Signature of Campaign Treasurer or Deputy Treasurer