APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) (PLEASE PRINT OR TYPE)	I do Not PLANE EIVED RAISE FUNDS2010 MAY 14 PM 2:20 MANATEE COUNTY SUPERVISOR OF ELECTION
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, zip code) 227 FA1R WAY-TSLES LW
4. Telephone 4. Telephone (941) 747-4471 to Loparker OGHALLOM (941) 747-4471 to Loparker OGHALLOM	
6. Office sought (include district, circuit, group number) Heltrope Anabout South CDD Stat 5 7. If a candidate for a <u>nonpartisan</u> 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 X No Party Affiliation	
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer	
11. Mailing Address	12. Telephone ()
13. City 14. County 15. S	tate 16. Zip Code 17. E-mail address
18. I have designated the following bank as my	
19. Name of Bank	20. Address
21. City 22. County	23. State 24. Zip Code
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 574-18	26. Signature of Candidate
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
I,, do hereby accept the appointment (Please Print or Type Name)	
designated above as: Campaign Treasurer Deputy Treasurer.	
Date X	Signature of Campaign Treasurer or Deputy Treasurer

٦