

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

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

(PLEASE PRINT OR TYPE)

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

RECEIVED

2018 JUN 18 PM 12 25

DEPT COUNTY
ELECTIONS

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)

MICHAEL B HOLDERNESS

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

7126 WESTMORELAND DR
SARASOTA FL 34243

4. Telephone

(941) 359-9797

5. E-mail address

DONZIMIKE38@GMAIL.COM

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

CEDAR HAMMOCK FIRE CONTROL 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 Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

MICHAEL B HOLDERNESS

11. Mailing Address

7126 WESTMORELAND DR

12. Telephone

(941) 359-9797

13. City

SARASOTA

14. County

MANATEE

15. State

FL

16. Zip Code

34243

17. E-mail address

DONZIMIKE38@GMAIL.COM

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

19. Name of Bank

IBERIA BANK

20. Address

5844-14TH ST. W. 34207

21. City

BRADENTON

22. County

MANATEE

23. State

FL

24. Zip Code

34207

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

6-8-18

26. Signature of Candidate

X [Signature]

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

I, MICHAEL B HOLDERNESS, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6-8-18

Date

X

[Signature]

Signature of Campaign Treasurer or Deputy Treasurer