## 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

## I do not intent to spend or receive funds for my campaign

SUPERATED ELECTIONS

officer before opening the campaign account.								OFFICI	<u> USE</u>	ONLY
1. CHECK APPROPRIATE  Initial Filing of Form	•	<b>S):</b> -filing to Change:		Treasurer	/Deputy	] Deposit	tory	Office		Party
Name of Candidate (in this order: First, Middle, Last)     James M. Burke					Address (include post office box or street, city, state, zip code)  5662 Duval St					
4. Telephone	5. E-ma	il address	N-10-WILL		Bradenton, FL 34203					
(941 ) 749-1927	flburkes@verizon.com				•					
6. Office sought (include o	· · · · · · · · · · · · · · · · · · ·	7. If a candidate for a <u>nonpartisan</u> office, check if								
Board of Supervisors Harbourage at Braden River C Seat # 4					DD 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 ☐							Pa	arty cand	didate.	
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			ate 16	te 16. Zip Code 17. E-mail address					
18. I have designated the following bank as my					Primary Depository Secondary Depository					
19. Name of Bank				20. Address						
21. City	1. City 22. Co		2. 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 2					26. Signature of Candidate					
6/20/18				X (	X James M Burke					
27. Treasure	er's Acc	eptance of Appo	intmen	t (fill in th	e blanks and	check the	appropria	te block)		
I,, do hereby accept the appointment										
(Please Print or Type Name)										
designated above as: Campaign Treasurer Deputy Treasurer.										
X										
Date				Signature of Campaign Treasurer or Deputy Treasurer						