## 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

F do not retended use or collect on spring any money MANATER COUNTY SUPERVISOR OF ELECTIONS

officer before opening the campa					OFFICE	= 02E	UNLY			
1. CHECK APPROPRIATE BOX(ES):  Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Defice Party										
					<u> </u>					
2. Name of Candidate (in this order: First, Middle, Last)				3. Address (include post office box or street, city, state, zip code) 10865 Keentoun Ro						
4. Telephone 5. E-mail address										
4. Telephone 5. E-mail address Duetle, FL 34219 (941) 545.1319 red cigar 046001 cm										
6. Office sought (include district, circuit, group number)  7. If a candidate for a <u>nonpartisan</u> office, check if										
Dute Fredresche Commission				applicable:  My intent is to run as a Write-In candidate.						
8. <b>If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable:</b> My intent is to run as a										
Write-In No Party AffiliationParty candidate.										
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										
12 City				to 16 7in Code 17 Empiled land						
13. City 14. C	14. County 15. State			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	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 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.										
	4	X								
Date Signature of Campaign Treasurer or Deputy Treasurer										