PPOINTMENT 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.

4. Telephone

Write-In

13. City

21. City

19. Name of Bank

Johnstintenke CELVAD

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Collect or Supervisor of ELECTIONS

On

OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Re-filing to Change: Initial Filing of Form Treasurer/Deputy Depository Party 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) Michael L. Finney 8451 Sailing loop Lakewood Ranch, FL 34202 5. E-mail address (941) 306-5060 mfinney@mgforce.biz 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if LWR CDD-2, Seat#1 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 No Party Affiliation Party candidate. **Deputy Treasurer** 9. I have appointed the following person to act as my Campaign Treasurer 10. Name of Treasurer or Deputy Treasurer 11. Mailing Address 12. Telephone 15. State 16. Zip Code 17. E-mail address 14. County

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 5-26-2020

18. I have designated the following bank as my

26. Signature of Camdidate

Primary Depository

23. State

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

20. Address

27.

22. County

, do hereby accept the appointment (Please Print or Type Name)

> Deputy Treasurer. Campaign Treasurer

Signature of Campaign Treasurer or Deputy Treasurer Date

designated above as:

Secondary Depository

24. Zip Code