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2020 JUN -2 PM 2: 58

TANALEE COUNTY SUPERVISOR OF ELECTIONS

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.

officer before opening the campaign account.			OFFICE USE ONLY			
1. CHECK APPROPRIATE BOX(ES):						
Initial Filing of Form	Re-filing to Change	Trea	surer/Deputy	Depository	Of	fice Party
2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip						
GRIEST WAYNE TURNBUM COde) 7676 SILVERWOOX CO						
4. Telephone 5. E-mail address						
GRIEST WAYNE TURNBOM 4. Telephone (94/38889/8 wayneturnbly cogna). Or code) 767 SILVERWOOD CT LAKENOOD RANCH, FC 34767.						
6. Office sought (include dist	ber)	7. If a candidate for a <u>nonpartisan</u> office, check if applicable:				
LAUD CAN C		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						
11. Mailing Address 12. Telephone						
13. City	3. City 14. County 15. St		ate 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	L	23. State		24. 2	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 Cantidate						
6/2/2n X 0/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1						
27. Treasurer's Acceptance of Appointment (fill in the branks and check the appropriate 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						