

**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.

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MANATEE COUNTY  
SUPERVISOR OF 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)

HAROLD E BYRD JR

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

1502 14TH STREET EAST  
BRADENTON, FL 34208

**4. Telephone**

(941 ) 803-0685

**5. E-mail address**

HEBYRDJR@AOL.COM

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

MANATEE COUNTY SCHOOL BOARD DISTRICT 2

**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**

SHARON D BYRD

**11. Mailing Address**

1502 14TH STREET EAST

**12. Telephone**

( 941 ) 448-0087

**13. City**

BRADENTON

**14. County**

MANATEE

**15. State**

FL

**16. Zip Code**

34208

**17. E-mail address**

HEBYRDJR@AOL.COM

**18. I have designated the following bank as my**

Primary Depository     Secondary Depository

**19. Name of Bank**

GROW FINANCIAL FCU

**20. Address**

P.O. Box 89909

**21. City**

TAMPA

**22. County**

HILLSBOROUGH

**23. State**

FLORIDA

**24. Zip Code**

33689-0415

**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**

01/13/2022

**26. Signature of Candidate**

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

I, HAROLD E BYRD JR, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

1/13/22

Date

X Sharon D Byrd

Signature of Campaign Treasurer or Deputy Treasurer