

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

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**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

**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)

Phillip, Gene, Lantry

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

3316 Cypress Point Cir.  
St. Cloud, FL 34772

**4. Telephone**

(407) 873-7843

**5. E-mail address**

Phil@electphillantry.com

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

St. Cloud City Council Member Seat 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**

Phillip Lantry

**11. Mailing Address**

3316 Cypress Point Cir.

**12. Telephone**

(407) 873-7843

**13. City**

St. Cloud

**14. County**

Osceola

**15. State**

FL

**16. Zip Code**

34772

**17. E-mail address**

Phil@electPhillantry.com

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

SouthState Bank

**20. Address**

2819 13th street

**21. City**

St. Cloud

**22. County**

Osceola

**23. State**

FL

**24. Zip Code**

34769

**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**

09/18/2023

**26. Signature of Candidate**



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

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

designated above as:  Campaign Treasurer     Deputy Treasurer.

09/18/2023  
Date

  
Signature of Campaign Treasurer or Deputy Treasurer