

**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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BRIAN E. CORLEY
SUPERVISOR OF ELECTIONS
LAND O'LAKES, FLORIDA

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)
Peter C Rundel

3. Address (include post office box or street, city, state, zip code)
**8539 Winsome Way
Land O Lakes, FL 34637**

4. Telephone
(**813**) **802-8970**

5. E-mail address
pete@therundels.com

6. Office sought (include district, circuit, group number)
Connerton West CDD Seat #3

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 ^{PCP} 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
Ellen T Rundel

11. Mailing Address
8539 Winsome Way, Land O Lakes, FL 34637

12. Telephone
(**813-802-8960**)

13. City
LOL

14. County
Pasco

15. State
FL

16. Zip Code
34637

17. E-mail address
ellen@therundels.com

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

19. Name of Bank
Suntrust

20. Address
7914 Land O Lakes Blvd

21. City
Land O Lakes

22. County
Pasco

23. State
Florida

24. Zip Code
34638

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
April 5 2018

26. Signature of Candidate
X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)
I, **Ellen T Rundel**, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

5-6-18
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer