

**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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BRIANE CORLEY
SUPERVISOR OF ELECTIONS
NEW PORT RICHEY, 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)
Christopher J Billings

3. Address (include post office box or street, city, state, zip code)
9119 Ridge Rd. Suite 152
New Port Richey Fl, 34654

4. Telephone (727) 753-8696 5. E-mail address ChrisBillings4judge@gmail.com

6. Office sought (include district, circuit, group number)
Pasco County Judge, Group 5

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
Christopher Billings

11. Mailing Address 9119 Ridge Rd. Suite 152 12. Telephone (727) 753-8696


13. City New Port Richey 14. County Pasco 15. State FL 16. Zip Code 34654 17. E-mail address ChrisBillings4Judge@gmail.com

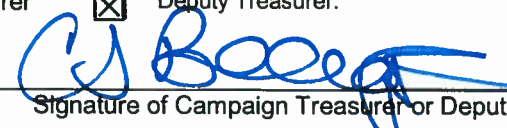
18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank SunTrust 20. Address 5412 Little Rd

21. City New Port Richey 22. County Pasco 23. State Florida 24. Zip Code 34655

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 7/31/19 26. Signature of Candidate X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)
 I, Chris Billings, do hereby accept the appointment
 (Please Print or Type Name)
 designated above as: Campaign Treasurer Deputy Treasurer.
7/31/19 X 
 Date Signature of Campaign Treasurer or Deputy Treasurer