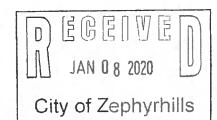
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying



officer perore opening the	camp	aign account.							OFFICE	E USE	ONLY	
1. CHECK APPROPRIATE Initial Filing of Form		:s): e-filing to Change	: 🛛	Trea	surer/Deputy	☐ Deposit	огу		Office		Party	
Name of Candidate (in this order: First, Middle, Last) W. Alan Knight					3. Address (include post office box or street, city, state, zip code) 5649 Beech Street Zephyrhills, FL 33542							
4. Telephone 5. E-mail address												
(352) 516-1436	fl											
6. Office sought (include di Council Seat 2		7. If a candidate for a <u>nonpartisan</u> 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 P	Party candidate.											
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer												
10. Name of Treasurer or Deputy Treasurer W. Alan Knight												
11. Mailing Address		12. Telephone										
5649 Beech Street		(352) 516-1436										
13. City 14. County			15. State		16. Zip Code	16. Zip Code 17. E-mail			address			
Zephyrhills Pasco				L	33542	aknight@ci.zephyrhills.fl.us.us						
18. I have designated the following bank as my Primary Depository Secondary Depository												
					20. Address							
SunTrust					11704 U.S. Highway 301							
21. City						23. State		24. Zip Code				
Dade City Pasco					Flo		33525					
UNDER PENALTIES OF PERJURY DESIG	/, I DECI NATION	LARE THAT I HAVE F OF CAMPAIGN DEP	READ TH	IE FOI	REGOING FORM F	OR APPOINTM S STATED IN IT	ENT OF	CAMP	AIGN TREA	ASURE	R AND	
25. Date	26.	6. Şignature of Candidate										
1/8/2020					Nallace ala LA							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I,, do hereby accept the appointment												
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
1/8/2020 X Wallice (h) =												
Date Signature of Campaign Treasurer or Deputy Treasurer												
DS-DE 9 (Rev. 10/10) Rule 1S-2.0001, F.A.C.											A.C.	