## 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

FEB 1 3 2020

officer before opening the						OFFICE	E USE	ONLY					
1. CHECK APPROPRIATE Initial Filing of Form		<b>S):</b> -filing to Chang	e: 🔲 7	reas	urer/De	eputy [	] Deposito	ry 🔲	Office		Party		
2. Name of Candidate (in this order: First, Middle, Last)						3. Address (include post office box or street, city, state, zip							
Knute John Nathe						code) 36150 Markree Castle Avenue							
4. Telephone 5. E-mail address					Dade City, Florida 33525								
(352 ) 339-5436	2 ) 339-5436 k.john.nathe@gmail.com												
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if								
City Commission of Dade City, Group 4					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 X 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													
Lynn Smith													
11. Mailing Address 12. Telephone													
13702 14th Street ( 352									567-563	36			
13. City	City 14. County		15. Sta	ate	16. Z	Zip Code 17. E-mail address							
Dade City	e City Pasco		Florida		3352	33525   Ismith@mcclainalf				fonso.com			
18. I have designated the following bank as my Primary Depository Secondary Depository													
19. Name of Bank 20. Address													
CenterState Bank 14045 7th Street													
21. City		22. County				23. State			24. Zip Co	ode			
Pasco Pasco					Florida			33525					
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 26. Signature of Candidate													
2/13/2020 X1/110 Typtes													
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:													
Jeb. 13,2020 X Sim / atrel 12/													