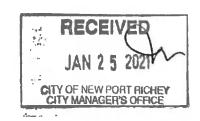
## APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)



NOTE: This form must be on file with the qualifying officer before opening the campaign account.									OFF	CE USE	ONLY		
1. CHECK APPROPRIATI	BOX(ES	5):											
Initial Filing of Form		-filing to Change		reasur	er/Deputy		Deposito	ry 🗀	Office	<b>,</b>	Party		
2. Name of Candidate (in	3. Address (include post office box or street, city, state, zip code)												
James Michael Peters					6446 River Rd								
4. Telephone						New Port Richey, Fl 34652							
(727 ) 992- <b>%</b> 109	m												
6. Office sought (include	7. If a candidate for a nonpartisan office, check if												
City Council Member	applicable:  My intent is to run as a Write-In candidate.												
8. If a candidate for a <u>partisan</u> 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													
Michael Peters													
11. Mailing Address	12. Telephone												
6446 River Rd	( 727 ) 992-8109												
13. City New Port Richey	1_	county	15. St		16. Zip Cod 34652	•							
18. I have designated the following bank as my Primary Depository Secondary Depository													
19. Name of Bank BB&T Bank	20. Address 9005 SR 52												
21. City		23. State					24. Zip Code						
Hudson		22. County Pasco			FI				34669				
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													
01/25/2021	Jean of the tet												
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
I, Michael Peters					, do hereby accept the appointment								
(Please Print or Type Name)													
designated above as:		Campaign	Treasure	r [	Deputy	Tre	asurer						
01/25/2021 X Mult													
Date				Signature of Campaign Treasurer or Deputy Treasurer									