

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

FEB 16 2021

CITY OF PORT RICHEY

10:35 AM.

**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)

THOMAS E. KINSELA

3. Address (include post office box or street, city, state, zip code)

8203 AQUILA STREET

4. Telephone

(727) 207-0106

5. E-mail address

TEK0508@aol.com

PORT RICHEY, FL 34668

6. Office sought (include district, circuit, group number)

CITY COUNCIL MAN

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

THOMAS E. KINSELA

11. Mailing Address

8203 AQUILA STREET

12. Telephone

(727) 207-0106

13. City

PORT RICHEY

14. County

PASCO

15. State

FL

16. Zip Code

34668

17. E-mail address

ASK1212@aol.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

SPINOVUS BANK

20. Address

6435 RIDGE RD

21. City

PORT RICHEY

22. County

PASCO

23. State

FL

24. Zip Code

34668

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

2/16/2021

26. Signature of Candidate

X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, THOMAS E. KINSELA, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

2/16/2021

Date

X


Signature of Campaign Treasurer or Deputy Treasurer