

**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.

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BRIAN E CORLEY
SUPERVISOR OF ELECTIONS
NEW PORT RICHEY, FLORIDA

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) **Cynthia Armstrong** 3. Address (include post office box or street, city, state, zip code) **9251 Alcott Way
Trinity, FL 34655**

4. Telephone **(727) 364-7653** 5. E-mail address **armstcyn@gmail.com**

6. Office sought (include district, circuit, group number) **Pasco County School Board
District 3** 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 **Greg Armstrong**

11. Mailing Address **9251 Alcott Way** 12. Telephone **(727) 534-9951**

13. City **Trinity** 14. County **Pasco** 15. State **FL** 16. Zip Code **34655** 17. E-mail address **armgreg@verizon.net**

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

19. Name of Bank **First National Bank of Pasco** 20. Address **13315 US Hwy 301**

21. City **Dade City** 22. County **Pasco** 23. State **FL** 24. Zip Code **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 **7/13/2021** 26. Signature of Candidate **X Cynthia Armstrong**

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)
 I, **Greg Armstrong**, do hereby accept the appointment
 (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.
7-13-21 **X** **[Signature]**
 Date Signature of Campaign Treasurer or Deputy Treasurer