

**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.

RECEIVED
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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)

MATT Geiger

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

5051 Eosign Loop
New Port Richey, FL 34652

4. Telephone

(412) 614-1768

5. E-mail address

mattygeiger@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

EDITH WILLIAMS

11. Mailing Address

5116 WESTSHORE DR

12. Telephone

(407) 943-7276

13. City

NEW PORT RICHEY

14. County

PASCO

15. State

FL

16. Zip Code

34652

17. E-mail address

edithwilliams1@cfl.rr.com

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

19. Name of Bank

TRUIST

20. Address

4807 US Highway 19 Suite 101

21. City

New Port Richey

22. County

PASCO

23. State

FL

24. Zip Code

34652

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

11/23/2021

26. Signature of Candidate

X *Matt Geiger*

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

I, EDITH WILLIAMS, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

11-23-2021

Date

X

Edith Williams

Signature of Campaign Treasurer or Deputy Treasurer