

**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

22 JUN -2 PM 4:52

BRIANE 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)

John M. Legg

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

10217 Palladio Drive
New Port Richey, Florida 34655

4. Telephone

(727) 514-3313

5. E-mail address

jlegg4pasco5uper@gmail.com

6. Office sought (include district, circuit, group number)
Pasco County Superintendent of Schools

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 ☒ Republican Party candidate.

9. I have appointed the following person to act as my ☐ Campaign Treasurer ☒ Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Kim Bailes

11. Mailing Address

1103 Hays Street

12. Telephone

(850) 212-0226

13. City

Tallahassee

14. County

Leon

15. State

Florida

16. Zip Code

32301

17. E-mail address

noreen@pacfm.net

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

19. Name of Bank

Truist Bank

20. Address

3522 Thomasville Road

21. City

Tallahassee

22. County

Leon

23. State

Florida

24. Zip Code

32309

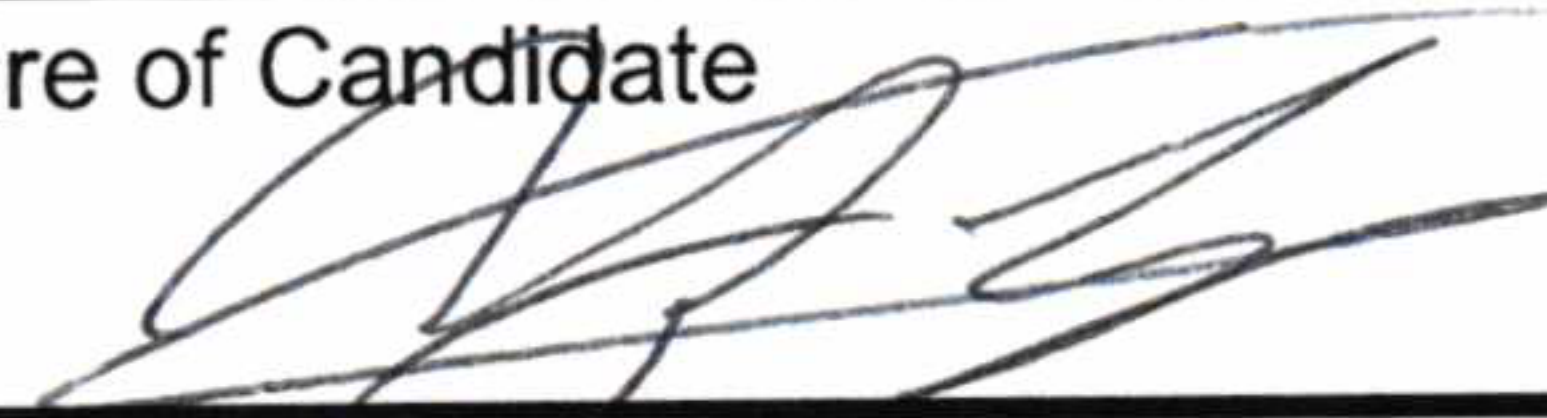
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

6/2/22

26. Signature of Candidate

X



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

I, Kim Bailes, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☐ Campaign Treasurer.

☒ Deputy Treasurer.

6/2/22

Date

X



Signature of Campaign Treasurer or Deputy Treasurer