

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

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

(PLEASE PRINT OR TYPE)

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BRIAN E CORLEY
SUPERVISOR OF ELECTIONS
NEW YORK OFFICE USE ONLY FLORIDA

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

1. CHECK APPROPRIATE BOX(ES):			
<input checked="" type="checkbox"/> Initial Filing of Form	<input type="checkbox"/> Re-filing to Change:	<input type="checkbox"/> Treasurer/Deputy	<input type="checkbox"/> Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last) Michelle R. Mandarin		3. Address (include post office box or street, city, state, zip code) 16034 US 19, Hudson FL	
4. Telephone (1) 813 8633288	5. Candidate's Voter Registration #: 131257456 (Not required for Qualifying Purposes)		34667
(Not required for Qualifying Purposes) - Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): Mi-shell Man-da-rin			
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 <input type="checkbox"/> No Party Affiliation <input checked="" type="checkbox"/> Republican Party candidate.			
9. I have appointed the following person to act as my <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer			
10. Name of Treasurer or Deputy Treasurer Michelle R. Mandarin		11. Telephone (1) 813 8633288	
12. Mailing Address 16034 US 19	13. City Hudson	14. State FL	15. Zip Code 34667
16. I have designated the following bank as my W <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
17. Name of Bank Wells Fargo		18. Address 8423 Bridge Rd	
19. City New Port Richey	20. County Pasco	21. State FL	22. Zip Code 34654
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.			
23. Date 10/10/23		24. Signature of Candidate X	
25. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)			
I, Michelle Mandarin, do hereby accept the appointment (Please Print or Type Name)			
designated above as: <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer.			
10/10/23 Date		X Signature of Campaign Treasurer or Deputy Treasurer	

Compound Last Names

If your last name consists of two or more names and has no hyphen, check the box in the Candidate Oath section. If you fail to