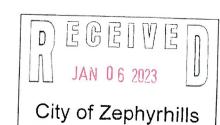
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(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.



officer before opening the		-				OFFICE	- 03E	CHLI				
1. CHECK APPROPRIATE BOX(ES):												
Initial Filing of Form	Initial Filing of Form Re-filing to Change: 🗵 T						Deposito	ory 🗌	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)						3. Address (include post office box or street, city, state, zip						
W. Alan Knight					code) 5649 Beech Street							
4. Telephone	5. E-mail address				Zephyrhills, FL 33542							
(352) 516-1436	352) 516-1436 aknight@ci.zephyrhills.fl.											
6. Office sought (include district, circuit, group number)						7. If a candidate for a <u>nonpartisan</u> office, check if						
Zephyrhills Seat 2						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 W. Alan Knight												
11. Mailing Address					12. Telephone							
5649 Beech Street						(352) 516-1436						
13. City			15. Sta	ate		5. Zip Code 17. E-mail address						
Zephyrhills Pasco F					33542 aknight@ci.zephyrhills.fl.us							
18. I have designated the following bank as my Primary Depository Secondary Depository												
19. Name of Bank					20. Address							
SouthState Bank				6930 Gall Blvd.								
1. City 22. County						23. State FL			24. Zip Code 33542			
	Zephyrhills Pasco					M. M. SONOGO MANAGEMENT AND						
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					26. Signature of Candidate							
1/6/2023					x W M K							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I, W. Alan Knight , to hereby accept the appointment												
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
X Signature of Campaign Treasurer or Deputy Treasurer												
/ Date				Olgila	ature (or Campai	gii iicasui	or or pept	ry moasui	J1		