

**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  
23 JUL -7 AM 11:23  
BRIANE L. COKLEY  
SUPERVISOR OF ELECTIONS  
LAND O'LAKES, 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)

**Clyde (CJ) Smith II**

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

4824 School Rd., Land O'Lakes, FL, 34638

**4. Telephone**

( 813 ) 893-9026

**5. E-mail address**

clydesmith.ii.fpk@gmail.com

**6. Office sought** (include district, circuit, group number)

Pasco County School Board District 2

**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**

Clyde L. Smith II

**11. Mailing Address**

4824 School Rd.

**12. Telephone**

( 813 ) 893-9026

**13. City**

Land O'Lakes

**14. County**

Pasco

**15. State**

FL

**16. Zip Code**

34638

**17. E-mail address**

clydesmith.ii.fpk@gmail.com

**18. I have designated the following bank as my**

Primary Depository

Secondary Depository

**19. Name of Bank**

Wells Fargo

**20. Address**

22735 State Road 54

**21. City**

Land O'Lakes

**22. County**

Pasco

**23. State**

FL

**24. Zip Code**

34638

**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**

7/7/2023

**26. Signature of Candidate**

X 

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

I, Clyde L. Smith II, do hereby accept the appointment  
(Please Print or Type Name)

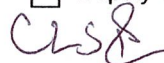
designated above as:

Campaign Treasurer.

Deputy Treasurer.

7/7/23

X



Date

Signature of Campaign Treasurer or Deputy Treasurer