

**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 SEP 21 AM 10:08

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)

GARY WINFIELD JOHNSON

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

1256 CYPRESS KNOLL DR
NEW PORT RICHEY, FL 34653

4. Telephone

(727) 243-5811

5. Candidate's Voter Registration #:

106328569

(Not required for Qualifying Purposes)

(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):

GARY WINFIELD JOHNSON

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

PASCO MOSAICO COUNCIL
SURT 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

GONZALO M STORV

11. Telephone

(727) 858-3315

12. Mailing Address

9405 SAVOY CT

13. City

NEW PORT RICHEY

14. State

FL

15. Zip Code

34654

16. I have designated the following bank as my Primary Depository Secondary Depository

17. Name of Bank

FLAGSHIP BANK

18. Address

9040 TRITON BLVD STU A 102

19. City

TRINITY

20. County

PASCO

21. State

FL

22. Zip Code

34655

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

9-21-23

24. Signature of Candidate

Gary Johnson

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

I, GONZALO M STORV, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer. Deputy Treasurer.

9-21-23

Date

Gonzalo M Storv

Signature of Campaign Treasurer or Deputy Treasurer