

**STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

(PLEASE TYPE)

RECEIVED ONLY

2006 MAY -1 PM 4:27

**KURT S. DROWNING
SUPERVISOR OF ELECTIONS
WESLEY CHAPEL, FLORIDA**

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate GERALD D. LYNN	1. Address (include post office box or street, city, state, zip code) 30407 LETTINGWELL CIRCLE WESLEY CHAPEL, FL 33543-7932
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Telephone (optional) 813-991-4484	2. Party (Partisan candidates only) NPA	3. Office (add district, circuit or group number) SUPERVISOR MOGAW POINT # CDD SEAT 3
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I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer
GERALD D. LYNN

5. Mailing Address (If post office box or drawer add street address) 30407 LETTINGWELL CIRCLE	6. Telephone 813-991-4484
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7. City WESLEY CHAPEL	8. County PASCO	9. State FL	10. Zip Code 33543-7932
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I have designated the following named bank as my Primary Depository Secondary Depository

11. Name of Bank SUNTRUST BANK	12. Street Address 14102 BRUCE S DEWENS BLVD
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13. City TAMPA	14. County HILLSBOROUGH	15. State FL	16. Zip Code 33647
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17. Signature of Candidate X 	Date 5/1/06
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Campaign Treasurer's Acceptance of Appointment

I, **GERALD D. LYNN**, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of **GERALD D. LYNN**

who is seeking nomination or election as a **NON PARTISAN NPA** candidate to the office of

**SUPERVISOR MOGAW POINT # CDD
SEAT 3** (Party) As a duly registered voter in **PASCO**

County, Florida, I am qualified to accept this appointment.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

5/1/06
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer