

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

JAN 17 2018

SUPERVISOR OF ELECTIONS
PASCO COUNTY, FLORIDA

2:14pm
(Signature)

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

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)

Frank I. Grey II

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

P.O. Box 1679, New Port Richey FL, 34656

4. Telephone

(727) 992-2007

5. E-mail address

greyfi2@aol.com

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

County Judge Group 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

Frank Grey

11. Mailing Address

P.O. Box 1679

12. Telephone

(727) 992-2007

13. City

New Port Richey

14. County

Pasco

15. State

FL

16. Zip Code

34656

17. E-mail address

greyfi2@aol.com

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

19. Name of Bank

Synovus Bank

20. Address

10820 FL-54 *U.S. HWY 54*

21. City

Trinity

22. County

Pasco

23. State

FL

24. 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.

25. Date

1.17.18

26. Signature of Candidate

X *(Signature)*

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

I, *FRANK I. GREY*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1.17.18

Date

X *(Signature)*

Signature of Campaign Treasurer or Deputy Treasurer