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 2021 SEP -3 PM 2:06 SUPERVISOR OF ELECTIONS ELECTION SERVICE CENTER OFFICE USE ONLY						
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Defice Party									
2. Name of Candidate (in this order: First, Middle, Last)				3. Address (include post office box or street, city, state, zip code)					
Brian E. Gnage			P.O. Box 17212						
1. Totophone	5. E-mail address		Clearwater, FL 33762						
(727) 380-1142 ir	nfo@briangnage.c	om							
6. Office sought (include district, circuit, group number) Pinellas County Court Judge, Group 5				7. If a candidate for a <u>nonpartisan</u> 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									
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🔲 Deputy Treasurer									
10. Name of Treasurer or Deputy Treasurer									
Brian E. Gnage									
11. Mailing Address				12. Telephone					
P.O. Box 17212				(727) 380-1142					
13. City	14. County	15. St	ate 1	te 16. Zip Code 17. E-ma		ail address			
Clearwater	Pinellas	FL	3	33762 info@briangnag			e.com		
18. I have designated the following bank as my Primary Depository Secondary Depository									
19. Name of Bank Synorus Bank				20. Address 12450 Roosevelt Blvd					
21. City 22. County			23. State				24. Zip Code		
St. Petersburg	Pinellas			FL			33716		
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									
09/03/21				XA					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)									
I,	, do hereby accept the appointment								
(Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer.									
09/03/2021 X									
				Signature of Campaign Treasurer or Deputy Treasurer					

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