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



2022 MAY 27 AM 11: 12

REG DATE

officer before opening the campaign account.					OFFICE USE ONLY							
1. CHECK APPROPRIATE BOX(ES):												
	Re	-filing to Change:	: 🔲 T	reasu	ırer/D	eputy [Depos	sitory		Office	☐ Party	
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip							
Les Nichols					code) 931 Tangled Oaks Dr							
4. Telephone	5. E-mail address				Sarasota Florida 34232							
(850)9102969	clnichols78@gmail.com											
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if							
Charter Review Board, District 1					applicable: My intent is to run as a Write-In candidate.							
				0000								
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable : My intent is to run as a												
									ndidate.			
9. I have appointed the following person to act as my												
10. Name of Treasurer or Deputy Treasurer Les Nichols												
11. Mailing Address	12. Telephone											
931 Tangled Oaks Drive						(850)9102969						
13. City	14. County 15. Sta			ate								
Sarasota Sarasota FI					34232 clnichols78@gmail.com						m	
18. I have designated the following bank as my Primary Depository Secondary Depository												
					20. Address 5851 Fruitville Rd,							
21. City	the same of the sa				23. State				24. Zip Code		ode	
Sarasota	sota Sarasota			FI						34232		
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.												
Thomas along the second control of the secon					26. Signature of Candidate							
5-26-2022 ×					XXXX							
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 Tre	asurer.			Deputy Tr	easurer.					
5-26-2022 X					4							
						ignature of Campaign Treasurer or Deputy Treasurer						