

**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.**

SUPERVISOR OF ELECTIONS  
SARASOTA COUNTY

2021 AUG -3 PM 2:37

FILED FOR RECORD  
SARASOTA COUNTY

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)**

Gregory M Wood

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

641 Darwin Rd Venice, FL 34293

**4. Telephone**

(843 ) 3231153

**5. E-mail address**

THE GREG WOODS OUTLOOK.COM

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

School Board, District 5

**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**

Michael K Worthington

**11. Mailing Address**

3793 Sterling Rd.

**12. Telephone**

(941) 724-0029

**13. City**

VENICE

**14. County**

SARASOTA

**15. State**

FL

**16. Zip Code**

34293

**17. E-mail address**

MIKE@MKWORTHINGTON.COM

**18. I have designated the following bank as my**

☒ Primary Depository ☐ Secondary Depository

**19. Name of Bank**

SABAL PALM BANK

**20. Address**

735 EAST VENICE AVENUE

**21. City**

VENICE

**22. County**

SARASOTA

**23. State**

FL

**24. Zip Code**

34285

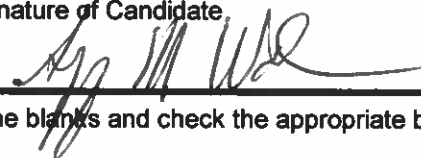
**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

8-2-2021

**26. Signature of Candidate**

X



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

I, Michael K Worthington, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

August 2, 2021 X

Date

  
Signature of Campaign Treasurer or Deputy Treasurer