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

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

(PLEASE PRINT OR TYPE)

RECEIVED FEB 1 4.2017

DAYTONA BEACH SHORES CITY CLERK

NOTE: This form must be on file with the qualifying

officer before opening the campaign account.							OFFICE	E USE	ONLY	
1-CHECK APPROPRIATE BOX(ES):										
Initial Filing of Form	asurer/	Deputy [Depository		Office		Party			
2. Name of Candidate (in this order: First, Middle, Last)				3. Address (include post office box or street, city, state, zip						
RICHARD ROBERT FRITAUNCE				code) 3245 SOUTH ATLANTIC AVE						
4. Telephone 5. E-mail address			- UNIT 1005							
(813) 695-0014	PATTONA DEACH SHURE: FL 32118									
6. Office sought (include district, circuit, group number) , それ、こか 7. If a candidate for a <u>nonpartisan</u> office, check if										
(20-1				applicable:						
SCAT /				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 AffiliationParty candidate.										
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer										
10. Name of Treasurer or Deputy Treasurer										
5CCF										
11. Mailing Address 12. Telephone										
				()						
13. City	14. County	15. State	; 16.	Zip Code	17. E-mail a	ddress				
18. I have designated the following bank as my Primary Depository Secondary Depository										
19. Name of Bank			20. Address							
BOA				3>46 SOUTH ATLANTIC 23. State 24. Zip Code 3 4/1 2						
21. City	22. County	_		23. State	,	2	24. Zip Co	ode		
PATTONA BRACH SHONG VOLUSIA FC 32118										
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 Carididate						
2/14/2018			X //s							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
1, RTCHARD I-RTZALONR, do hereby accept the appointment (Please Print or Type Name)										
designated above as: Campaign Treasurer Deputy Treasurer.										
2/14/2018 X RR Foulue									ļ	
Date		Si	Signature of Campaign Treasurer or Deputy Treasurer							