

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

RECEIVED

FEB 14 2022

BY CITY CLERK

K. McQuinn

(PLEASE PRINT OR TYPE)

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)

Michael Kolody

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

105 Via Capri, New Smyrna Beach, FL 32169

4. Telephone

(973) 222-5813

5. E-mail address

Kolody2018@gmail.com

6. Office sought (include district, circuit, group number)
City Commissioner, Zone 1, City of New Smyrna Beach, FL

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 **Republican** 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 Kolody

11. Mailing Address

105 Via Capri, New Smyrna Beach, FL 32169

12. Telephone

(973) 222-5813

13. City

NEW SMYRNA BEACH

14. County

VOLUSIA

15. State

FL

16. Zip Code

32169

17. E-mail address

KOLODY2018@GMAIL.COM

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

19. Name of Bank

Wells Fargo

20. Address

1791 SR 44

21. City

New Smyrna Beach

22. County

Volusia

23. State

FL

24. Zip Code

32168

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

02/14/2022

26. Signature of Candidate

X *Michael Kolody*

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

I, Michael Kolody, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer. Deputy Treasurer.

02/14/2022

Date

X *Michael Kolody*
Signature of Campaign Treasurer or Deputy Treasurer