

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

RECEIVED

AUG 07 2023

CITY OF EDGEWATER
CITY CLERK

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)

GARY THOMAS CONROY

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

3107 Queen Palm Dr.
EDGEWATER, FL. 32141

4. Telephone

(386) 314-7898

5. E-mail address

gconroy10@att.net

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

Council #4

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

Gary Conroy

11. Mailing Address

3107 Queen Palm Dr. EDGEWATER, FL. 32141

12. Telephone

(386) 314-7898

13. City

EDGEWATER

14. County

Volusia

15. State

FL

16. Zip Code

32141

17. E-mail address

gconroy10@att.net

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

19. Name of Bank

Wells Fargo

20. Address

1813 S. RIDGEWOOD AVE

21. City

EDGEWATER

22. County

Volusia

23. State

FL

24. Zip Code

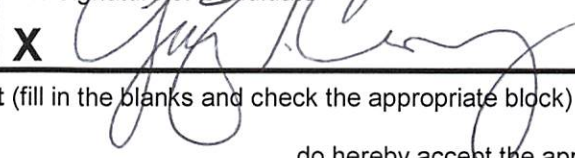
32141

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

8/07/23

26. Signature of Candidate

X 

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

I, GARY CONROY, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer.

☐ Deputy Treasurer.

8/07/23

Date

X


Signature of Campaign Treasurer or Deputy Treasurer