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.			OFFICE USE ONLY		
1. CHECK APPROPRIATE	BOX(ES):				
Initial Filing of Form	Re-filing to Change	e: 🔲 Trea	surer/Deputy [Depository [Office Party
2. Name of Candidate (in th	_ast)	3. Address (include post office box or street, city, state, zip			
Joseph E. Wiamond			code) 3026 North 18th Av		
4. Telephone 5. E-mail address with the second of the seco					
S/OW roll to the					
6. Office sought (include district, circuit, group number) Number Leach Fiscophesan			7. If a candidate for a <u>nonpartisan</u> office, check if applicable:		
Commister Sex	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					
11. Mailing Address	12. Telephone				
			()		
13. City	14. County	15. State	e 16. Zip Code 17. E-mail address		
18. I have designated the following bank as my Primary Depository Secondary Depository					
19. Name of Bank 20. Address					
21. City	22. County		23. State		24. Zip Code
zn oky	22. County		23. SIDILE		24. Zip Code
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 Candidate;					
9-217-12			The F		
27. Treasurer's	Acceptance of Appoi	ntment (fill i	n the blanks and	check the appropria	ate block)
,, do hereby accept the appointment					
(Please Print or Type Name)					
designated above as: Campaign Treasurer Deputy Treasurer.					
		Χ			
Date		Signature of Campaign Treasurer or Deputy Treasurer			

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