4												
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)			CITY CLERK									
			KER	14 MAR'22PM4:27:54 CITY OF NORTH PORT								
(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		-filing to Change:				eputy] Deposito		Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip							
Philip M. Stokes					code) 20210 Lagente Circle							
4. Telephone	5. E-mail address				North Port, FL 34293							
(941) 281-0598	wiseph	il2000@yahoo	o.com			1 010, 1 2 1						
6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if												
City of North Port Commission District 5						applicat			0000	,		
City of North Port Commission District 5					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												
Philip M. Stokes												
11. Mailing Address					12. Telephone							
20210 Lagente Circle					(941)281-0598							
13. City		County	15. St	ate								
North Port	Sara	sota	FL	34293 wisephil2000@yahoo.com								
18. I have designated the	K F	Prima	ry Depositor	y 🗌	Seconda	ry Deposito	ory					
19. Name of Bank				20. Address								
Truist					Jacaranda Boulevard							
21. City 22. County					23. State				24. Zip Co	ode		
Venice		Sarasota				FL			34293			
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					Signa	ture of Can	didate	0				
3/14/22				X LATT								
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
1.		, do hereby accept the appointment										
I, Philip M. Stokes (Please Print or Type Name)							,		t the oppen	lunen.		
designated above as: Campaign Treasurer Deputy Treasurer.												
<u> 3/14/22</u> X												
Date Signature of Campaign Treasurer or Deputy Treasurer												