

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

APR 30 2012

OFFICE OF THE CITY CLERK

(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)

Heather Gracy

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

826 Broadway
Dunedin, FL 34698

4. Telephone

727 16471614

5. E-mail address

heather.gracy@verizon.net

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

Dunedin City Commission, Seat 3

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

Melvin L. Sams II

11. Mailing Address

1000 Pinellas Street

12. Telephone

(727) 465-6767

13. City

Clearwater

14. County

Pinellas

15. State

FL

16. Zip Code

33756

17. E-mail address

msams@bollenback.com

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

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

4/30/12

26. Signature of Candidate

X Heather Gracy

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

I, Melvin L Sams II, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

Campaign Treasurer Deputy Treasurer.

4/30/12
Date

X Melvin L Sams II A.
Signature of Campaign Treasurer or Deputy Treasurer

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Heather Gracy

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

826 Broadway
Dunedin FL 34698

4. Telephone

(727) 647-1614

5. E-mail address

heather.gracy@verizon

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

Dunedin City Commission, Seat 3

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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

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25. Date

4/30/12

26. Signature of Candidate

X

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

I, Heather Gracy, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/30/12
Date

X A.
Signature of Campaign Treasurer or Deputy Treasurer