					urer/Do		] Deposit		OFFICE USE ONLY Office Party	
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip code)					
4. Telephone ( )	5. E-ma	il address								
6. Office sought (include district, circuit, group number)						<ul> <li>7. If a candidate for a <u>nonpartisan</u> office, check if applicable:</li> <li>My intent is to run as a Write-In candidate.</li> </ul>				
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										
11. Mailing Address					12. Telephone ( )					
13. City	14. County 15.		15. St	ate 16. Zip Code 17. E-mail address						
18. I have designated the following bank as my								ry Depository		
19. Name of Bank					20. Address					
21. City	1. 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					26. Signature of Candidate X					
27. <b>Treasurer's Acceptance of Appointment</b> (fill in the blanks and check the appropriate block)										
I,, do hereby accept the appointment										
(Please Print or Type Name) designated above as:										
X										
Date     Signature of Campaign Treasurer or Deputy Treasurer									ty Treasurer	