

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

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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)

Gail Lynn Coniglio

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

*1139 North Ocean Blvd.
Palm Beach, Fl. 33480*

4. Telephone

(561) 644-0892

5. E-mail address

gailconig1@aol.

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

Mayor

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

Gail Lynn Coniglio

11. Mailing Address

1139 N. Ocean Blvd Palm Beach Fl. 33480

12. Telephone

(561) 644-0892

13. City

Palm Beach

14. County

Palm Beach

15. State

Fl

16. Zip Code

33480

17. E-mail address

gailconig1@aol.com

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

19. Name of Bank

First Bank of the Palm Beaches

20. Address

615 N. Dixie Hwy

21. City

Palm

22. County

Palm Beach

23. State

Fl

24. Zip Code

33401

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

11/18/16

26. Signature of Candidate

X Gail L. Coniglio

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

I, *Gail L. Coniglio*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

11/18/16

Date

X

Gail L. Coniglio

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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I, Gail L. Coniglio,
candidate for the office of Mayor;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Gail L. Coniglio 11/18/16
Signature of Candidate Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).