

**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.

RECEIVED

2011 OCT 24 AM 10:43

BRIAN E. CORLEY  
SUPERVISOR OF ELECTIONS  
DADE CITY, FLORIDA

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)

Roberta Lynn Cutting

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

P.O. Box 2944  
Zephyrhills, FL 33539

4. Telephone

(352) 206-5187

5. E-mail address

roberta\_cutting@yahoo.com

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

Clerk of the Circuit Court  
County Comptroller

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

James R. Cutting

11. Mailing Address

P.O. Box 2944

12. Telephone

(352) 206-5800

13. City

Zephyrhills

14. County

Pasco

15. State

FL

16. Zip Code

33539

17. E-mail address

jcutting10@yahoo.com

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

19. Name of Bank

Suntrust

20. Address

34511 State Rd. 54

21. City

Zephyrhills

22. County

Pasco

23. State

FL

24. Zip Code

33541

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

10-24-11

26. Signature of Candidate

X Roberta Cutting

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

I, JAMES R. CUTTING, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

10-24-11

Date

X

James R. Cutting  
Signature of Campaign Treasurer or Deputy Treasurer