

Appointment of Political Treasurer

For State and Local Candidates and Single-Candidate Committees

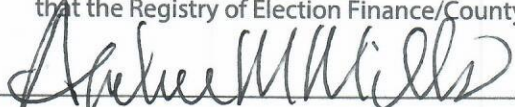
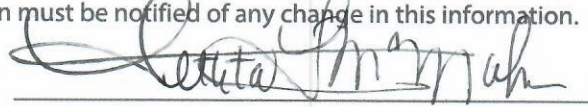
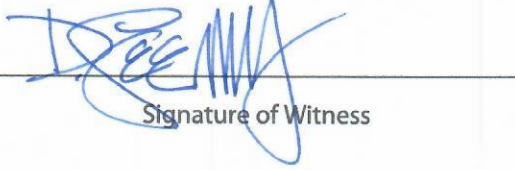

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INSTRUCTIONS

The Appointment of Political Treasurer statement must be used to appoint a political treasurer as required by the Campaign Financial Disclosure Act (T.C.A. § 2-10-105) for state and local candidates and single-candidate political campaign committees. A state candidate may not receive or expend funds for an election until a political treasurer has been appointed for that election. A local candidate pursuant to T.C.A. 2-10-101, may be exempt from completing this form, please check with county election commission for more information. A candidate may appoint himself or herself as political treasurer. A new form must be filed if the treasurer is changed.

Candidates for state public office must file their original Appointment of Political Treasurer statement ONLY with the Registry of Election Finance, 404 James Robertson Parkway, Suite 104, Nashville, TN 37243-1360.

Candidates for local public office must file their original Appointment of Political Treasurer statement ONLY with their county election commission.

1. Date: 10/1/2021		2. Name of Candidate or Committee: Friends of Amber Mills		3. Candidate e-mail address: info@electambermills.com	
4. Campaign Address and Phone:					
PO BOX 253		City Arlington	State TN	Zip Code 38002	Phone 901-592-5424
5. Home Address and Phone (if different than item 4 above):					
12903 Shane Hollow Drive		City Arlington	State TN	Zip Code 38002	Phone 901-592-5424
6. Office Sought (include district number, if applicable) County Commission - District 1		7. Party Affiliation Republican		8. Election Year 2022	
9. Treasurer Name: Letitia McMahan		10. Treasurer e-mail address: robertandleitia@gmail.com			
11. Treasurer Address and Phone:					
6105 Upper Granger Cove		City Arlington	State TN	Zip Code 38002	Phone 559-904-3212
12. Candidate and Treasurer Signature (both signatures must be witnessed. Treasurer can not witness candidate's signature):					
I certify under the penalty of perjury that the information given on this form is true and accurate. In addition, I understand that the Registry of Election Finance/County Election Commission must be notified of any change in this information.					
					
Signature of Candidate		Signature of Treasurer			
					
Signature of Witness		Signature of Witness			

