

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

2023 SEP 22 AM 11:22

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)

MARY CATHERINE ALFORD

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

13880 SW 173rd Court
Archer FL 32618

4. Telephone

(352) 317 4480

5. Candidate's Voter Registration #:

108367756

(Not required for Qualifying Purposes)

(Not required for Qualifying Purposes) - Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form):

MA-REE AL-FORD

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

ALACHUA COUNTY COMMISSIONER
DISTRICT ONE

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 DEMOCRATIC Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

MARY CATHERINE ALFORD

11. Telephone

(352) 317 4480

12. Mailing Address

13880 SW 173rd Court

13. City

ARCHER

14. State

FL

15. Zip Code

32618

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

17. Name of Bank

CAMPUS USA CREDIT UNION

18. Address

PO BOX 147029

19. City

GAINESVILLE

20. County

ALACHUA

21. State

FL

22. Zip Code

32614

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.

23. Date

9/22/23

24. Signature of Candidate



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

I, MARY ALFORD (Please Print or Type Name), do hereby accept the appointment

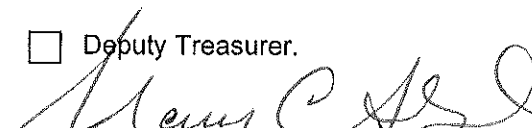
designated above as:

Campaign Treasurer.

Deputy Treasurer.

9/22/23

Date


Signature of Campaign Treasurer or Deputy Treasurer