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

OFFICE USE ONLY

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officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
Initial Filing of Form Re-filing to Change: Tree	easurer/Deputy Depository 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-mail address	1590 Blusson Trail
(850)476-8777 linda_moultricabell=uff	Pensarda FI 32505
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
School Board - District 3	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	
11. Mailing Address	12. Telephone
1590 Blosson Pruil	(88) 476-8777
13. City 14. County 15. State Penscieda Escapia Fr	e 16. Zip Code 17. E-mail address
18. I have designated the following bank as my Primary Depository Secondary Depository	
	20. Address
21. City 22. County	745 E. N. 10. M. C. C
Pensala Escanbia	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
5/20/13	XXIII Mullai
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
i, NICA MULLIFE. (Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasurer Deputy Freasurer.	
5/20/13 × July Mully:	
Date	ignature of Campaign Treasurer or Deputy Treasurer