

CITY OF ORANGE CITY  
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CITY CLERK'S OFFICE *PP*

**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 filing 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):  
(Please Print or Type Name)

*Dana Marie Knight*

3. Address (include PO Box or Street, City, State, Zip Code):

*1555 N. Silverstone Ct.  
Orange City, FL 32763*

4. Telephone:

*(407) 883-9165*

5. Candidate's Voter Registration #:

*115562648*  
(not required for qualifying purposes)

6. Email Address:

*DanaLou68@gmail.com*

7. Office Sought (include district, circuit, group, or seat #):

*Orange City - City Council at large*

8. If a candidate for a nonpartisan office, check the box if applicable:

I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate.     No Party Affiliation Candidate.     \_\_\_\_\_ Party candidate.

10. I have appointed the following person to act as my:

Campaign Treasurer

Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

*Dana Knight*

12. Telephone:

*(407) 883-9165*

13. Email Address:

*DanaLou68@gmail.com*

14. Mailing Address:

*1555 N. Silverstone Ct.*

15. City:

*Orange City*

16. State:

*Florida*

17. Zip Code:

*32763*

18. I have designated the following bank as my (check appropriate box):  Primary Depository     Secondary Depository

19. Name of Bank:

*Mainstreet*

20. Address:

*850 S. Volusia Ave.*

21. City:

*Orange City*

22. County:

*Volusia*

23. State:

*Florida*

24. Zip Code:

*32763*

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

*3/22/24*

26. Signature of Candidate:

*[Signature]*

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

I, *Dana Knight* do hereby accept the appointment designated above as:

(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date:

*3/22/24*

29. Signature of Campaign Treasurer or Deputy Treasurer

*[Signature]*