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 qua officer before opening the campaign account.	alifying				•	OFFICI	E USE	ONLY	
1. CHECK APPROPRIATE BOX(ES):	***************************************	·		· · · · · · · · · · · · · · · · · · ·	# ####################################	-			
Initial Filing of Form Re-filing to Change	: Tr	reasurer/	Deputy [Depositor	ry 🔲	Office		Party	
2. Name of Candidate (in this order: First, Middle, L	_ast)		•	de post office	e box or s	street, city,	state,	zip	
Craia Elliota Castel		code)		w 3 @ S	54.				
Craig Ellioth Cartel 4. Telephone 5. E-mail address				ille, FL		5.			
(352)339-4038 craigezgo@a	ol.com	,	DOUNCS.	(110)		· ·			
6. Office sought (include district, circuit, group number)			7. If a candidate for a <u>nonpartisan</u> office, check if						
City Commission District ?			applicable: My intent is to run as a Write-In candidate.						
CIT COMMISSION DISTRICE 3							Cale.		
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a									
Write-In No Party AffiliationParty candidate.									
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer									
10. Name of Treasurer or Deputy Treasurer						 -			
Craig Carter			<u> </u>			·			
11. Mailing Address			i i	12. Telep		~ ~ 5	_		
3880 NM 30 2F						339-4	<u>386</u>	<u> </u>	
13. City 14. County	15. State					. Cor	\sim		
Cainesville Alachya 18 I have designated the following bank as my	- 								
18. I have designated the following bank as my Primary Depository Secondary Depository									
19. Name of Bank	4	20. Addre		Main	57				
21. City 22. County		V	23. State			24. Zip Co	ode		
Cairesville Alach	L I A		FL			3260°	_		
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							
11-20-13		X							
27. Treasurer's Acceptance of Appo	intment (fill in the	blanks and	check the a	ppropriate	e block)	_		
I, Crocia Caster (Please Print or Type Name)				, do here	by accept	t the appoir	ntment	,	
·			_/						
designated above as: Campaign Tr	reasurer (M	Deputy Trea	asurer.					
11-20-13	X								
Date	ZŚ	ignature	of Campaiç	gn Treasurer	or Deput	y Treasure	ar .		