APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

RECEIVED OCT 17 2017

NOTE: This form must be on file with the qualifying **OFFICE USE ONLY** officer before opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): Re-filing to Change: X Treasurer/Deputy Depository Initial Filing of Form 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip 2924 NW 13th Dr GAMESVIlle, FC 32609 4. Telephone (35) 256-5629 | louddown ersations @ Smail com 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circuit, group number) applicable: City Commission Dist 1 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 candidate. Party Write-In No Party Affiliation Campaign Treasurer X **Deputy Treasurer** 9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer AIM Compras 12. Telephone 11. Mailing Address Bid) 256-5129 2924 NW 1347 DC 17. E-mail address 15. State 16, Zip Code 13. City 32609 loudd conversation a gonard. Co (Pinesuille □ Secondary Depository Primary Depository 18. I have designated the following bank as my 20. Address 19. Name of Bank SANK 24. Zip Code 22. County 21. City 32601 Placha Jainpouille 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. 26. Signature of Candidate 25. Date 16-16-2017 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. , do hereby accept the appointment Deputy Treasurer. Campaign Treasurer designated above as: X 16 -16 -2017 Date Signature of Campaign Treasurer or Deputy Treasurer

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(35 d) 256-269 10099 600 decaptions @ 2 mali											
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C144 Commission Dist I applicable: N/4 My intent is to run as a Write-In candidate.								date.			
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☐ Write-In ☐ No Party Affiliation ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐											
9. I have appointed the following person to act as my											
10. Name of Treasurer or Deputy Treasurer											
Eric Charles Higbie											
11. Mailing Address 12. Telephone											
2601 SW Archer Rd #339 (352) 222-8426											
13. City				la recessorie							
Gainesville Alachua Fl			32608 eric.higb@gmail.com								
18. I have designated the following bank as my Primary Depository Secondary Depository											
19. Name of Bank 20. Address											
Bonk of America 1116 West University Are											
21. City 22. County			23. State					24. Zip C	ode		
Chinesulle Blackua			190					321	001		
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										
16-16-1	X My Muns										
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I, Eric Charles Higbie				, do hereby accept the appointment							
(Please Print or Type Name)											
designated above as: Campaign Treasurer Deputy Treasurer.											
10/16/17 X Ciri Addi											
Date			Signature of Campaign Treasurer or Deputy Treasurer								