

**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 officer before opening the campaign account.

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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)

Marihelen Haddock Wheeler

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

1122 NW 18th Ave  
Gainesville, Florida 32609

**4. Telephone**

(352) 371-6356

**5. E-mail address**

wheelmh@gmail.com

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

Alachua County Commission, District 2

**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**

Betty June Keena

**11. Mailing Address**

3320 NW 25th Ave

**12. Telephone**

(352) 318-3951

**13. City**

Gainesville

**14. County**

Alachua

**15. State**

FL

**16. Zip Code**

32605

**17. E-mail address**

mirrormete20@gmail.com

**18. I have designated the following bank as my** ☒ Primary Depository ☐ Secondary Depository

**19. Name of Bank**

Campus USA

**20. Address**

5115 NW 43rd St

**21. City**

Gainesville

**22. County**

Alachua

**23. State**

Florida

**24. Zip Code**

32606

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**

10/12/17

**26. Signature of Candidate**

X Marihelen Haddock Wheeler

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

I, Betty June Keena, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

10/12/17  
Date

X

Betty Keena  
Signature of Campaign Treasurer or Deputy Treasurer