## 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.				OFFICE USE ONLY						
1. CHECK APPROPRIATE BOX(ES):										
➢ Initial Filing of Form	Re-filing to Cha	ange: 🔲 T	reasure	er/Deputy 🗀	Depository		Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)					de post office bo	x or st	reet, city,	state,	zip	
Scott AI	Ian Coste	110	cod	,	· · · · · · rd		ممال			
4 Telephone	5 F-mail address				υω 43 <sup>rd</sup>	_	· •			
(357)281.2072	scott@advanta	gepublishi com	ישאי ,	Gaines	ville if C	FC 32606				
6. Office sought (include d	***************************************				didate for a <u>nor</u>	npartis	san office	, chec	k if	
Alachua Courty Commission District? ☐ My intent is to run as a Write-In candidate								idate.		
8. If a candidate for a part	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										
Erica Brown										
11. Mailing Address					12.	. Teleph	none			
4830 NW 43 PC (352)372-585								4		
13. City	14. County	15. Sta		16. Zip Code	17. E-mail add	dress				
Gainesville	fainesville Alachua Fi		;	32606	€ rica@ ac	<u>novk</u>	,+08epc	ablish	استهايد.	
18. I have designated the	following bank as r	my 🔀	Z Prim	mary Depositor	ry Sec	condar	y Deposito	ory		
19. Name of Bank			20. Add							
CHIZENS S	State Bank 22. County	462	10 mm 3	39 AVR	Sur	ite A				
21. City	22. County	y		23. State			24. Zip Co			
Gainesville Alachua				†L			3260	,6		
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										
10/31/17				X full Statello						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
I, Erich Bruun (Please Print or Type Name)					, do hereby a	accept	the appoir	ntmen	t	
designated above as:		aign Treasure	er	Deputy Trea	asurer.					
10.31.17		X	_	>15						
Date Signature of Dampaign Treasurer or Deputy Treasurer										