

**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.

CITY OF GAINESVILLE  
CITY COMMISSION

2019 FEB -1 AM 8:58

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)

Robert T. Mounts

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

1639 NW 11th Road  
Gainesville, FL 32605-5319

**4. Telephone**

(352) 665-9296

**5. E-mail address**

robert.t.mounts@gmail.com

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

City Commissioner District 4

**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 ☐ N/A Party candidate.

**9. I have appointed the following person to act as my** ☒ Campaign Treasurer ☐ Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Diane Hurtak

**11. Mailing Address**

1640 NW 22nd Circle

**12. Telephone**

(352) 275-6328

**13. City**

Gainesville

**14. County**

Alachua

**15. State**

FL

**16. Zip Code**

32605

**17. E-mail address**

diane.hurtak@gmail.com

**18. I have designated the following bank as my**

☒ Primary Depository ☐ Secondary Depository

**19. Name of Bank**

Ameris Bank

**20. Address**

7000 SW Archer Road

**21. City**

Gainesville

**22. County**

Alachua

**23. State**

Florida

**24. Zip Code**

32608

**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**

1 Feb 2019

**26. Signature of Candidate**

☒ Robert T. Mounts

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

I, Diane M. Hurtak, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

2/1/19

Date

☒

Diane M. Hurtak

Signature of Campaign Treasurer or Deputy Treasurer