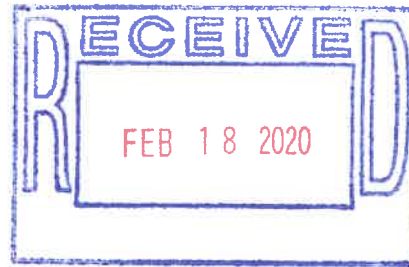


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)



2:37  
shew

**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 Change:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate (in this order: First, Middle, Last)**

DAVID WALLER

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

4324 NW 27th Terr. - 32605  
PO Box 357191  
Gainesville, FL 32635

**4. Telephone**

(352) 328-9384

**5. E-mail address**

dwaller@gmail.com

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

Gainesville City Commission, District 2

**7. If a candidate for a nonpartisan office, check if applicable:**

My intent is to run as a Write-In candidate.      N/A

**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.      N/A

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

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

ROBYN JENSEN

**11. Mailing Address**

PO Box 357191

**12. Telephone**

(352) 870-4549

**13. City**

Gainesville

**14. County**

Alachua

**15. State**

FL

**16. Zip Code**

32635

**17. E-mail address**

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

**19. Name of Bank**

Mid Florida Credit Union (Fka Community Bank + Trust)

**20. Address**

1800 W University Ave, Ste 130

**21. City**

Gainesville

**22. County**

Alachua

**23. State**

FL

**24. Zip Code**

32603

**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**

Feb 18, 2020

**26. Signature of Candidate**

X

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

I, Robyn Jensen, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

2/18/2020  
Date

X Robyn Jensen  
Signature of Campaign Treasurer or Deputy Treasurer