

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

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

(PLEASE PRINT OR TYPE)

CITY OF GAINESVILLE
CITY COMMISSION

19 NOV 14 PM 1:19

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)
Paul Jonathan Rhodenizer

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

*309 NW 25th St
Gainesville FL 32607*

4. Telephone
(352) 494-0628

5. E-mail address
prhodenizer@gmail.com

6. Office sought (include district, circuit, group number)
PR Gainesville City Commission (At Large) Seat 2

7. If a candidate for a nonpartisan office, check if applicable: *N/A*
 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* *PR* Party candidate.

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

10. Name of Treasurer or Deputy Treasurer
Linda Rhodenizer

11. Mailing Address
309 NW 25th Street

12. Telephone
(352) 871-4773

13. City
Gainesville

14. County
Alachua

15. State
FL

16. Zip Code
32607

17. E-mail address
grandma LBR@gmail.com

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

19. Name of Bank *USA*
Campana Credit Union

20. Address
1900 SW 34th St

21. City
Gainesville

22. County
Alachua

23. State
FL

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
Nov 12, 2019

26. Signature of Candidate
X Linda Rhodenizer

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)
I, *Linda Rhodenizer*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

11/12/19
Date

X Linda B. Rhodenizer
Signature of Campaign Treasurer or Deputy Treasurer