

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

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

(PLEASE PRINT OR TYPE)

2023 MAY 03 AM 11:30

**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)**

*Charles S Chestnut #*

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

*P.O. Box 5174  
Gainesville, FL 32627  
11827 N.W. 71st Terrace Alachua, FL 32615*

**4. Telephone**

*(352) 215-0659*

**5. E-mail address**

*CharlesChestnut@ymail.com*

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

*Alachua County Commission Dist. 5*

**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**

*Charles S. Chestnut #*

**11. Mailing Address**

*P.O. Box 5174, Gainesville, FL 32627*

**12. Telephone**

*(352) 215-0659*

**13. City**

*Gainesville FL*

**14. County**

*Alachua*

**15. State**

*FL*

**16. Zip Code**

*32627*

**17. E-mail address**

*CharlesChestnut@ymail.com*

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

Primary Depository     Secondary Depository

**19. Name of Bank**

*Wells Fargo*

**20. Address**

*1041 North Main Street*

**21. City**

*Gainesville*

**22. County**

*Alachua*

**23. State**

*Florida*

**24. Zip Code**

*32601*

**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**

*May 3, 2023*

**26. Signature of Candidate**

*X Charles S Chestnut #*

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

I, *Charles S. Chestnut #*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

*May 3, 2023*  
Date

*X Charles S Chestnut #*  
Signature of Campaign Treasurer or Deputy Treasurer