

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

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

(PLEASE PRINT OR TYPE)

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NOTE: This form must be on file with the filing officer before opening the campaign account.

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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):
(Please Print or Type Name)

3. Address (include PO Box or Street, City, State, Zip Code):

1266 SE 12th Ave
Gainesville, FL 32641

Leannetta McNealy

4. Telephone:

5. Candidate's Voter Registration #:

6. Email Address:

(352) 219-3898

(not required for qualifying purposes)

mnealyegm@sbae.edu

7. Office Sought (include district, circuit, group, or seat #):

8. If a candidate for a nonpartisan office, check the box if applicable:

School Board of Alachua County

I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate. No Party Affiliation Candidate. N/A Party candidate.

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

11. Name of Treasurer or Deputy Treasurer:

12. Telephone:

13. Email Address:

Leannetta McNealy

(352) 219-3898

mnealyegm@sbae.edu

14. Mailing Address:

15. City:

16. State:

17. Zip Code:

1266 SE 12th Ave.

Gainesville

FL

32641

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

20. Address:

Alliance Credit Union

412 E. University Ave

21. City:

22. County:

23. State:

24. Zip Code:

Gainesville

Alachua

FL

32601

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

January 5, 2024

26. Signature of Candidate:

X Leannetta McNealy

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

I, Leannetta McNealy do hereby accept the appointment designated above as:

(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date:

Jan 5, 2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X Leannetta McNealy