APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

DS-DE 9 (Rev. 10/10)



Rule 1S-2.0001, F.A.C.

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 Office ☐ Depository Partv 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip Mexico Bch. FL 32410 6. Office sought (include district, circuit, group number) ドス(この おこうこん 7. If a candidate for a nonpartisan office, check if applicable: City council Group 5 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 Party candidate. 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer 11. Mailing Address 12. Telephone PO BOX 13102 (850) 381-2955 15. State 16. Zip Code 17. E-mail address 18. I have designated the following bank as my **Primary Depository** Secondary Depository 20. Address 529 Cecil 6 Cashin Blvd Peoples South P. 22. County 32456 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 26. Signature of Candidate 2-11-20 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) Sharon Cal , do hereby accept the appointment (Please Print or Type Name) designated above as: Deputy Treasurer. \mathbf{Y} Campaign Treasurer 2-12-20 Signature of Campaign Treasurer or Deputy Treasurer