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: 💢 Tr	reasurer/Deputy 💢 Depository 🔲 Office 🔲 Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip
ANDREW MARK KELLY	
4. Telephone 5. E-mail address	
(850) 630-3614 PARAGE GORA (COM)	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpart san</u> office, check if
MAYOR, CITY of PARKER	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	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.	12. Telephone (850) 630 -3624
13. City 14. County 15. Sta	
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank	29/Address = 11/2/1/ TNUY
TRISTMAKK	14 3 1910 AII ()
21 City 22. County BAL	23 State 24. Zip Code 39 40 4
UNDER PENALTIES OF PERJURY, I DECLARE THAT I NAVE 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 Carididate
25 Jan 2021	x HOWNIY
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
1. ANDREW M. KELLY (Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasurer Deputy Treasurer.	
	ZI Ou MILL
X	Signature of Campaign Treasurer or Deputy Treasurer