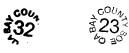
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

opening the campaign account.

DS-DE 9 (Eff. 10/23)



Rule 1S-2.001, F.A.C.

NOTE: This form must be on file with the filing officer before OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): ☐ Office ☐ Partv ■ Initial Filing of Form
□ Re-filing to Change: ☐ Treasurer/Deputy ☐ Depository 3. Address (include PO Box or Street, City, State, Zip Code): 2. Name of Candidate (in this order: First, Middle, Last): P.O. Box 968 (Please Print or Type Name) Bill Kinsaul Lvnn Haven, FL 32444 5. Candidate's Voter Registration #: 6. Email Address: 4. Telephone: (859) 381 - 3631 (not required for qualifying purposes) wdkinsaul@gmail.com 7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a nonpartisan office, check the box if applicable: Clerk of Court, Bay 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 Republican Party candidate. ☐ No Party Affiliation Candidate. ☐ Write-In Candidate. ☐ Deputy Treasurer 10. I have appointed the following person to act as my: 13. Email Address: 12. Telephone: 11. Name of Treasurer or Deputy Treasurer: wdkinsaul@gmail.com Bill Kinsaul 17. Zip Code: 14. Mailing Address: 15. City: Lynn Haven 32444 P.O. Box 968, Lynn Haven, FL 32444 18. I have designated the following bank as my (check appropriate box): 🔳 Primary Depository 🔲 Secondary Depository 20. Address: 19. Name of Bank: 2718 MLK Jr. Blvd Panhandle Credit Union 24. Zip Code: 22. County: 23. State: 21. City: 32405 Panama City Bav 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. 26. Signature of Candidate: 01/0**2**/2024 25. Date: Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box) 27. do hereby accept the appointment designated above as: (Please Print or Type Name) Deputy Treasurer. Campaign Treasurer. 29. Signature of Campaign-Treasurer of Deputy Treasurer 28. Date: 03 X