

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

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

(PLEASE PRINT OR TYPE)

RECEIVED
JUN 20 2019
CITRUS COUNTY
ELECTIONS

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)

SANDY B. COUNTS

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

PO Box 375
HOMOSASSA SPRINGS FL 34447

4. Telephone

(352) 628-4222

5. E-mail address

COUNTS22@centurylink.net

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

SCHOOL BOARD DISTRICT 4

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 _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

M. Denise Kuczen

11. Mailing Address

11814 W. Riverhaven Drive

12. Telephone

(352) 634-0026

13. City

HOMOSASSA

14. County

CITY

15. State

FL

16. Zip Code

34448

17. E-mail address

MDK88@tampabay.rr.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

BRANNEN BANIK

20. Address

4325 S. SUNCOAST BLVD.

21. City

HOMOSASSA

22. County

CITRUS

23. State

FL

24. Zip Code

34446

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

6/20/19

26. Signature of Candidate

X *Sandy B Counts*

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

I, M. Denise Kuczen, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

20 June 2019
Date

X M. Denise Kuczen
Signature of Campaign Treasurer or Deputy Treasurer

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

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

(PLEASE PRINT OR TYPE)

RECEIVED
JUN 20 2019
CITRUS COUNTY
ELECTIONS

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)

SANDY B. COUNTS

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

PO BOX 375

HOMOSASSA SPRING FL 34447

4. Telephone

(352) 628-4222

5. E-mail address

counts22@centurylink.net

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

SCHOOL BOARD DISTRICT 4

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 _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Rebecca Clymer

11. Mailing Address

625 N. Golf Course Drive

12. Telephone

(352) 418-2142

13. City

Crystal River

14. County

Citrus

15. State

FL

16. Zip Code

34429

17. E-mail address

1groupergirl@gmail.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

BRANNEN BANK

20. Address

4325 S SUNCOAST BLVD

21. City

HOMOSASSA

22. County

CITRUS

23. State

FL

24. Zip Code

34446

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

6/20/19

26. Signature of Candidate



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

I, Rebecca Clymer, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6/20/19
Date

Rebecca Clymer
Signature of Campaign Treasurer or Deputy Treasurer