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

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

(PLEASE PRINT OR TYPE)

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:	T	reasu	urer/D	eputy	Depository		Office	Party		
2. Name of Candidate (in this order: First, Middle, Last)						Address (include post office box or street, city, state, zip						
Kristy Ward					code) 781 N Gardenview Ter							
4. Telephone	5. E-mail address				Crystal River FL 34429							
(352) 794-1708	ward4c	itrus@gmail.cor	m									
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if							
School Board District 2					applicable: My intent is to run as a Write-In candidate.							
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8. If a candidate for a <u>partisan</u> 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 Kristy Ward												
11. Mailing Address 12. Telephone												
781 N Gardenview Ter (352) 794-1708												
13. City	. City 14. County 15. S			ate	1	Zip Code	Į.	17. E-mail address				
Crystal River	Crystal River Citrus FL				34429 ward4citrus@gmail.com							
18. I have designated the following bank as my												
					20. Address							
Suncoast Credit Union					1039 NE 5th St				,			
21. City Crystal River	,					23. State Florida			24. Zip Code 34429			
	Tystal River Citrus											
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.												
					26. Signature of Candidate							
07/24/2023					X Kristy Ward							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
Kristy Ward , do hereby accept the appointment												
(Please Print or Type Name)												
designated above as:												
07/24/	07/24/2023 X Kristy Ward											
Date Signature of Campaign Treasurer or Deputy Treasurer												