

APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

RECEIVED

DEC 08 2023



NOTE: This form must be on file with the filing 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):  
(Please Print or Type Name)

HOLLY LEIGH DAVIS

3. Address (include PO Box or Street, City, State, Zip Code):

1180 E TRIPLE CROWN LOOP  
HERNANDO FL 34442

4. Telephone:

(352) 400 9726

5. Candidate's Voter Registration #:

115909470

(not required for qualifying purposes)

6. Email Address:

holly@hollydavisforcitrus.com

7. Office Sought (include district, circuit, group, or seat #):

County Commission District 5

8. If a candidate for a nonpartisan office, check the box if applicable:

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

Write-In Candidate.     No Party Affiliation Candidate.     Republican Party candidate.

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

11. Name of Treasurer or Deputy Treasurer:

HOLLY LEIGH DAVIS

12. Telephone:

(352) 400 9726

13. Email Address:

holly@hollydavisforcitrus.com

14. Mailing Address:

1180 E TRIPLE CROWN LOOP

15. City:

HERNANDO

16. State:

FL

17. Zip Code:

34442

18. I have designated the following bank as my (check appropriate box):     Primary Depository     Secondary Depository

19. Name of Bank:

Seacoast Bank

20. Address:

1160 N. Suncoast Blvd

21. City:

Crystal River

22. County:

Citrus

23. State:

FL

24. Zip Code:

344429

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.

25. Date: 12/08/2023

26. Signature of Candidate:

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

I, do hereby accept the appointment designated above as:

(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date: 12/08/2023

29. Signature of Campaign Treasurer of Deputy Treasurer