## 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 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, Las	3. Address (include PO Box or Street, City, State, Zip Code):				
(Please Print or Type Name)		1389 E. Birmock St.			
Scott F. Hebert		Hernondo, FL 34442			
		·			
4. Telephone: 5. Candidate's Voter Registration #: 6. Email Address:					
(352) 464-0583 1027/895/ drhebert 45 Perintendent Dgmailion					
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:					
Sufferintendent of Schools 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:	12. Telephone: 13. Email			Address:	
Mimber ly Darby (352) 464-0886 Kcdarby Comail. Lom					
14. Mailing Address:	15. Cit	y:	16. St		17. Zip Code:
7761 E. Breckenridge Loop	Inver	Ne55	, FL		34450
18. I have designated the following bank as my (check appropriate box): 🔀 Primary Depository 🔲 Secondary Depository					
19. Name of Bank: Brannen Bank 3+0 Hwy 41 South					
21. City:	22. Co	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		ate:	24. Zip Code:
Inverness		itous			24450
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:					
25. Date: 3/11/2024 X					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)					
Himberly Darby do hereby accept the appointment designated above as:					
do hereby accept the appointment designated above as:  (Please Print or Type Name)					
☐ Campaign Treasurer. ☐ Deputy Treasurer.					
28. Date: 11. 10.4 c. ( ) .1	29. Signature of Campaign Treasurer or Deputy Treasurer				
28. Date: 11 May 24	Xa houlded to Let and				
DS-DE 9 (Rev. 09/23) Rule 1S-2.0001, F.A.C.					