## 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.

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OFFICE USE ONLY

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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	3. Address (include PO Box or Street, City, State, Zip Code):			
(Please Print or Type Name)		ZYIZ Stonehaven Ct W		
Ricky Patric Knoles		600 0 1 51 72015		
[110] ( 1 att   Kno.03	Grange Park FL 32065			
4. Telephone: 5. Candidate's Voter Registration #: 6. Email Address:				
(470) 905-5337 18432155 (not required for qualifying purposes) Vickychvistiaking & gmail-com				
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box				
School Board - District 3   if applicable:				
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. ☐ Party candidate.				
10. I have appointed the following person to act as my:				
Name of Treasurer or Deputy Treasurer: 12. Telephone:			13. Email Address:	
Christia De Luna Knoles (404 1839-1512 rickychurstinking@gmailea				
14. Mailing Address: 15. Cit		y:	16. State:	17. Zip Code:
2412 Stanehaven Ct W Oran		ige Purk	FL	32065
18. I have designated the following bank as my (check appropriate box): 🗹 Primary Depository 🗌 Secondary Depository				
Name of Bank:		20. Address:		
Navy Federal Credit Union 21. City:	22 Co	6100 Coll unty:	1415 F.C.	24. Zip Code:
Jacksonville	7800000	uval	FL.	32244
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.				
Date: 26. Signature of Candidate:				
25. Date: 01/25/2624		X [3]		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)				
I. Christia D. Knoles do hereby accept the appointment designated above as:				
I,do hereby accept the appointment designated above as:  (Please Print or Type Name)				
☑ Campaign Treasurer. ☐ Deputy Treasurer.				
29. Signature of Campaign Treasurer of Deputy Treasurer				
28. Date: 61/25/2024		/ / ^	no C.	. Dopaty Housules
DS-DE 9 (Eff. 10/23)		, ,		Rule 1S-2.001, F.A.C.