

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

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

(PLEASE PRINT OR TYPE)

19 SEP 19 12:26 PM

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) <u>Hope Lunsford</u>	3. Address (include post office box or street, city, state, zip code) <u>1045 Peakview Dr Pensacola FL 32514</u>
4. Telephone <u>(850) 777-1497</u>	5. E-mail address <u>Hope.lunsford@gmail.com</u>

6. Office sought (include district, circuit, group number) <u>Emerald Coast Utilities Authority District Five</u>	7. If a candidate for a <u>nonpartisan</u> office, check if applicable: <input type="checkbox"/> My intent is to run as a Write-In candidate.
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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 Republican Party candidate.

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

10. Name of Treasurer or Deputy Treasurer
Hope Lunsford

11. Mailing Address <u>1045 Peakview Dr</u>	12. Telephone <u>(850) 777-1497</u>
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13. City <u>Pensacola</u>	14. County <u>Escambia</u>	15. State <u>FL</u>	16. Zip Code <u>32514</u>	17. E-mail address <u>Hope.lunsford@gmail.com</u>
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18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank <u>Bank of Pensacola</u>	20. Address <u>500 S Palafox St. Suite 100</u>
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21. City <u>Pensacola</u>	22. County <u>Escambia</u>	23. State <u>FL</u>	24. Zip Code <u>32502</u>
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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 <u>September 19, 2019</u>	26. Signature of Candidate <u>X [Signature]</u>
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27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Hope Lunsford, do hereby accept the appointment
 (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

<u>September 19, 2019</u> Date	<u>X [Signature]</u> Signature of Campaign Treasurer or Deputy Treasurer
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