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

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

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY NOTE: This form must be on file with the qualifying officer before opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): epository Initial Filing of Form Re-filing to Change: [ \_\_\_\_\_ reasurer/Deputy Office Party 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip The best David" Morgan P.O. BUX 30347 Punsquila, FL 32503 (850)341-7553 Hamorgan2020ggmail.com 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: My intent is to run as a Write-In candidate. 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 Party candidate. 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer 12. Telephone (850 )341-755 <del>></del> P.O. Bux 30347 14. County 17. E-mail address 13. City 15. State 16. Zip Code Piensacola Escambia Halmoran 20200 amil wm Secondary Depository 18. I have designated the following bank as my Primary Depository 20. Address 19. Name of Bank 24. Zip Code 21. City ESCAMB 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 26. Signature of Candidate s Acceptance of Appointment (fill in the blanks and check the appropriate block) The bert David" Morgan (Please Print or Type Name) , do hereby accept the appointment Deputy Treasurer. Campaign Treasurer designated above as: