## 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 qualifying officer before opening the campaign account.

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officer before opening the campaign account.			OFFICE USE ONLY						
1. CHECK APPROPRIATE BOX(ES):									
Initial Filing of Form	Re-filing to Change		asurer/l	Deputy [	Depository		Office	Party	
2. Name of Candidate (in this order: First, Middle, Last)			3. Address (include post office box or street, city, state, zip						
MYRA JEAN VANHOOSE			code) 2860 INVERNESS COURT						
4. Telephone 5. E-mail address			PENSACOLD, FL 32503						
(850) 374 0408			• / ·			,			
6. Office sought (include district, circuit, group number)				7. If a candidate for a <u>nonpartisan</u> office, check if					
COUNTY COMMISSION, DISTRECT 4				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 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐									
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer									
10. Name of Treasurer or Deputy Treasurer									
MYRA VAR	HOOSE								
11. Mailing Address 12. Telephone									
2840 INVERNESS CT  13. City PENSACOLA  14. County FL  15. State FL						(25°	v) 37	40408	
13. City PENSACOLA	14. County 15. Sta		16, Zip Code 17, F-mail address			dress			
PENSACOLA ESCAMBIA FL 32503 MYROUNNIOCSE® C  18. I have designated the following bank as my   Primary Depository   Secondary Depository									
19. Name of Bank 20. Address									
TRUIST			89 S B-CCANIZ BASSOS  23. State  24. Zip Code  32.502						
21. City	22. County	····		23. State			24. Zip Co	ode	
PENSACOLA	ESCAM	BID			FL			1502	
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.									
OF D.				26. Signature of Candidate					
6/13/22			x///2/2/4						
27. Treasurer's	Acceptance of Appoi	ntment (fi	ll in the	blanks and	check the appr	opriate	e block)		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1, MYRA- URN HOSE, , do hereby accept the appointment									
· · · · · · · · · · · · · · · · · · ·	(Please Print or Type N	ame)	***************************************		_ , do nereby	accept	t the appoir	itment	
designated above as:	Campaign Trea	surer.		Deputy Tre	easurer.				
6/13/22		Χ	7	19/		***************************************	<b>-</b> 3		
Date		Sic	naturé	of Campaig	n Treasurer or	Donut	V Tropouro	<u> </u>	