APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) (PLEASE PRINT OR TYPE)	"24 JAN 8. 4:21
NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
2. Name of Candidate (in this order: First, Middle, Last) <u>Earle Mount McAuley</u> 4. Telephone (850) 450-7419 (Not required for Qualifying Purposes)	PTYIS A COLA, FL SASUS
6. Office sought (include district, circuit, group number) Escambia County School Board DISTNICT 4 8. If a candidate for a <u>partisan</u> office, check block and fill Write-In No Party Affiliation	7. If a candidate for a nonpartisan office, check if applicable:     Image: My intent is to run as a Write-In candidate.     in name of party as applicable:   My intent is to run as a     Party   candidate.
9. I have appointed the following person to act as my	Campaign Treasurer
10. Name of Treasurer or Deputy Treasurer Earle Mount McAuly 12. Mailing Address 2133 Copley Drive Pinsa	$\begin{array}{c c} 11. \text{ Telephone} \\ (8 \mathcal{D}) & 4 \mathcal{D}-74/9 \\ \hline 14. \text{ State} \\ 15. \text{ Zip Code} \\ FL \\ 32 \mathcal{S} \mathcal{S} \mathcal{S} \end{array}$
16. I have designated the following bank as my	
17. Name of Bank Hancock Whitny 19. City Pansacula Escampik	18. Address 101 Wrst Cardin ST 21. State 22. Zip Code FL 32502
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ T	THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER
23. Date	RY AND THAT THE FACTS STATED IN IT ARE TRUE.     24. Signature of Candidate     X   M
I, Earle Mount (Please Print or Type Name)	t (fill in the blanks and check the appropriate block), do hereby accept the appointment
designated above as: Campaign Treasurer.	Deputy Treasurer.  M M Signature of Campaign Treasurer or Deputy Treasurer