APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

'24FEB 22 2:17PM

NOTE: This form must be on file with the filing officer before opening the campaign account,

OFFICE LISE ONLY

opening the campaign account. OFFICE USE ON						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): (Please Print or Type Name)			3. Address (include PO Box or Street, City, State, Zip Code):				
· · · · · · · · · · · · · · · · · · ·			2880 Belle Moode CT. Apt A				
Carne Elizabeth Young			Pensacola FL 32503				
4. Telephone: 5. Candidate's Voter Registration #: 6. Email							
(860) 313-4795 10757450 JCYOUNG 822@hotmo							
7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:							
Superviol Elections I intend to run as a Write-In Candidate.							
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. ☐ Democrat Party candidate.							
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer							
			12. Telephone: 13. Email Address:				
Carrie Elizabeth Young 1850/313-6795 Jeyoung 823@hotmailed							
4. Mailing Address: 15. City				16. State:		17. Zip Code: 325 03	
18. I have designated the following bank as my (check appropriate box): Primary Depository							
19. Name of Bank: South State Bank 4920 Bay				2400	Blod		
21. City:	22. County:			23. State:		24. Zip Code:	
Pensacola	130001110100		FL		32503		
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.							
2/00/		26. Signature of Candidate:					
25. Date: $2/22/24$		X (aui	\mathcal{E} ly	obete	Your	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)							
1, Orric Elizubeth Joungdo hereby accept the appointment designated above as: (Please Print or Type Name)							
☐ Campaign Treasurer. ☐ Qeputy Treasurer.							
2/ / /		29. Signature of Campaign Treasurer of Deputy Treasurer					
28. Date: 2/22/24		X	Carri	Elgo	beta 4	burg	
DS-DE 9 (Eff. 10/23)						Rule 1S-2.001, F.A.C.	