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 filing officer before

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OFFICE USE ONLY

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1. CHECK APPROPRIATE BOX	((ES):						
■ Initial Filing of Form □ Re-		pository PO Box	Office				
2. Name of Candidate (in this order: First, Middle, Last): (Please Print or Type Name) Jenori Cherlea Burroughs			3. Address (include PO Box or Street, City, State, Zip Code): 600 E. Texar Dr Pensacola, Fl. 32503				
4. Telephone: (470)385-9255	5. Candidate's Voter Registration #: 129389489 (not required for qualifying purposes) (not required for qualifying purposes)					hotmail.com	
7. Office Sought (include district, circuit, group, or seat #): City Council, District 5 8. If a candidate for a nonpartisan office, check the box if applicable: 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 Candid	late.	Democratic			_ Party candidate.	
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer							
11. Name of Treasurer or Deputy Treasurer:			12. Telephone: 13. Ema			Address:	
Claire Merritt			(850)572-5024 (Merri H850@yahoz				
14. Mailing Address:		15. Cit		16. St	ate:	17. Zip Code:	
3201 Torres Ave		Pensacola		FI		32503	
18. I have designated the following bank as my (check appropriate box): 🗹 Primary Depository 🗌 Secondary Depository							
19. Name of Bank: Regions Bank			20. Address: 5150 N. 9th Ave				
21. City: Pensacola		22. County: Escambia		23. State: FL		24. Zip Code: 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.							
25. Date: 14 June 2024			26. Signature of Candidate:				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)							
I, Claire Merrittdo hereby accept the appointment designated above as: (Please Print or Type Name)							
■ Campaign Treasurer. □ Deputy Treasurer.							
28. Date: 06.13.24			29. Signature of Campaign Treasurer of Deputy Treasurer X Clave Mem				
DS-DE 9 (Eff. 10/23) Rule 1S-2.001, F.A.C.							