## 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 opening the campaign account.

## 

JAN 17 2024

GADSDEN COUNTY SUPERVISOR OF ELECTIONS

**OFFICE USE ONLY** 

opening the campaign account.				<u> </u>	I JOE GOL CIAL!
1. CHECK APPROPRIATE BOX(ES):					
☐ Initial Filing of Form ☐ Re-filing to Change: ☐	Treasurer/Dep		· · · · · · · · · · · · · · · · · · ·	Office	☐ Party
2. Name of Candidate (in this order: First, Middle, Last (Please Print or Type Name)	' l	•			State, Zip Code):
	1	.D.Bo Havar	x Till	> _	
Eric Hinson				_ 32	333
4. Telephone:  (B50) 5195393  5. Candidate's Voter Registration #: 6. Email Address:  (B50) 5195393  (not required for qualifying purposes)  Crichinson 1209mgrl.com					
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a nonpartisan office, check the box					
County Commissioner, District I I 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. Fincend to full as a					
☐ Write-In Candidate. ☐ No Party Affiliation Candid	late. 🗹	<u>Dem</u>	ocrat	F	Party candidate.
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer					
11. Name of Treasurer or Deputy Treasurer:		Telephone:	<b>I</b>	Email Ad	
Self	(8)	50,5195	393 CV	(Zhin)	son 12@gmelly
14. Mailing Address:	15. City:		16. State:	li li	7. Zip Code:
P. O.BOX 905	Havai	ra /	1-6		32333
18. I have designated the following bank as my (check appropriate box): Primary Depository   Secondary Depository					
19. Name of Bank: (entennia/Bank	,	Address: Par	t Thon	næs Pk	ry
21. City:	22. County:	dsden	23. State:	- 2	4. 'Zip Code: 3235/
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: /-/7-2024	26. <b>X</b>	,			
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)					
I, Eric Hinsun (Please Print or Type Name)	do	hereby accept tl	he appointme	nt designal	ted above as:
Campaign Treasurer. Deputy Treasurer.					
20 Patri latt	29.				irer
28. Date: 1-17-2024	<u>  X</u>				
DS-DE 9 (Eff. 10/23)	-			Ru	ile 1S-2.001, F.A.C.

## STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

1, Eric Hinson

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## RECEIVED

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GADSDEN COUNTY SUPERVISOR OF ELECTIONS

candidate for the office of	Country	Commissioner, District I
have been provided access to rea	ad and unders	stand the requirements of
Chapter 106, Florida Statutes.		
		,
		1-17-2024
Signature of Candidate	Э	Date
Each candidate must file a statement Appointment of Campaign Treasurer and	with the qualify I Designation of	ying officer within 10 days after the Campaign Depository is filed. Willful

failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida

Statutes).