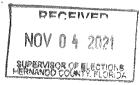
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(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. OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Partv 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) 730 Fernwood Di 1. Telephone 5. E-mail address

(352) 263 1531 jue san terell: @ Yaher.com Brooksville, FL 34601 6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if applicable: Brooksville Cata Council seat 5 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 Party candidate. 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer 10. Name of Treasurer or Deputy Treasurer Pry mcDonald

11. Mailing Address 12. Telephone 10096 Doming 0 D(
City | 14. County | 15. State 3522936644 13. City 16. Zip Code 17. E-mail address 34601 AMYM 3 18. I have designated the following bank as my Secondary Depository Primary Depository 19. Name of Bank 20. Address 1187 5 Broad St

23. State 24. Zip Code

K2 34601 21. City 22. County 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. 25. Date 26. Signature of Candidate Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. my MC Denci (d (Please Print or Type Name) _____, do hereby accept the appointment designated above as: Campaign Treasurer Deputy Treasurer. 1/ - 4/- 21 Date X Company Comp

DS-DE 9 (Rev. 10/10)

Rule 1S-2.0001, F.A.C.