

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

RECEIVED
MAY 19 2022
SUPERVISOR OF ELECTIONS
HERNANDO COUNTY, FLORIDA

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 Party

2. Name of Candidate (in this order: First, Middle, Last)

Kathryn ~~Ann~~^{XB} Birren

3. Address (include post office box or street, city, state, zip code)

3404 Gulfwinds circle
Hernando Beach, FL
34607

4. Telephone

(727) 919-5936

5. E-mail address

KathrynBirren4Hernando@yahoo

6. Office sought (include district, circuit, group number)

Hernando County Commissioner
District 2

7. If a candidate for a nonpartisan office, check if applicable:

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

Kathryn Ann Birren

11. Mailing Address

3404 Gulfwinds circle

12. Telephone

(727) 919-5936

13. City

Hernando Beach

14. County

Hernando

15. State

FL

16. Zip Code

34607

17. E-mail address

KathrynBirren4Hernando@yahoo.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Capital City Bank

20. Address

14302 Spring Hill Drive

21. City

Spring Hill

22. County

Hernando

23. State

FL

24. Zip Code

34609

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

05/19/2022

26. Signature of Candidate

X Kathryn Birren

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Kathryn Birren, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

Campaign Treasurer. Deputy Treasurer.

05/19/2022
Date

X Kathryn Birren
Signature of Campaign Treasurer or Deputy Treasurer