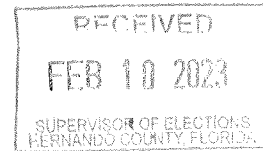


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(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    ☐ Party

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

Barbara-Jo Bell

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

PO Box 305

Brooksville, FL 34605

**4. Telephone**

(352) 279-0368

**5. E-mail address**

barbarajobellesq@gmail.com

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

County Court Judge, Hernando County, Group 1

**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**

Barbara-Jo Bell

**11. Mailing Address**

PO Box 305

**12. Telephone**

( )

**13. City**

Brooksville

**14. County**

Hernando

**15. State**

FL

**16. Zip Code**

34605

**17. E-mail address**

barbarajobellesq@gmail.com

**18. I have designated the following bank as my** ☐ Primary Depository ☐ Secondary Depository

**19. Name of Bank**

TRUIST BANK

**20. Address**

1 E. Jefferson Street

**21. City**

Brooksville

**22. County**

Hernando

**23. State**

FL

**24. Zip Code**

34601

**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**

February 10, 2023

**26. Signature of Candidate**

X Barbara-Jo Bell

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

I, Barbara-Jo Bell, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer. ☒ Deputy Treasurer.

February 10, 2023  
Date

X Barbara-Jo Bell  
Signature of Campaign Treasurer or Deputy Treasurer