

**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.

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):
(Please Print or Type Name)

John Walter McKethan II

3. Address (include PO Box or Street, City, State, Zip Code):

529 Colonial Dr. Brooksville FL 34601

4. Telephone:

(352) 556-7393

5. Candidate's Voter Registration #:

(not required for qualifying purposes)

6. Email Address:

jwmckethan@gmail.com

7. Office Sought (include district, circuit, group, or seat #):

Brooksville City Council, Seat 2

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 Candidate. ☒ Republican Party candidate.

10. I have appointed the following person to act as my:

☒ Campaign Treasurer

☐ Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

John McKethan

12. Telephone:

(352) 556-7393

13. Email Address:

jwmckethan@gmail.com

14. Mailing Address:

529 Colonial Dr

15. City:

Brooksville

16. State:

Florida

17. Zip Code:

34601

18. I have designated the following bank as my (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

19. Name of Bank:

Brannen Bank

20. Address:

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 THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date: 5/10/2024

26. Signature of Candidate:

X

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

I, John McKethan

(Please Print or Type Name)

do hereby accept the appointment designated above as:

☒ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date: 5/10/2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X