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.



opening the campaign account.				OFFICE USE ONLY				
1. CHECK APPROPRIATE BOX(ES):								
☐ Initial Filing of Form ■ Re	er/Depu	ıty 🗆 De	pository	Offic	e 🗆 Party			
2. Name of Candidate (in this of	3. Address (include PO Box or Street, City, State, Zip Code):							
(Please Print or Type Name) Seth A. Noe			24064 Eppley Drive Brooksville, FL 34601					
			BIOOKSVIIIe, FL 34001					
4. Telephone:	5. Candidate's Voter	tion #: 6. Email Address:						
(352) 4285292	104389512	sethnoe04@gmail.com						
(not required for quarrying purpose								
if an					If a candidate for a <u>nonpartisan</u> office, check the box applicable:			
Hernando County Property Appraiser							date.	
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. ☐ Party candidate.								
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer								
11. Name of Treasurer or Deputy Treasurer:			12. Telephone: 13. Email Address:			Address:		
Seth A. Noe			(352)4285292			sethnoe4@gmail.com		
14. Mailing Address:			15. City:		16. State:		17. Zip Code:	
24064 Eppley Drive			sville	FL			34601	
18. I have designated the following bank as my (check appropriate box): Primary Depository								
19. Name of Bank:			20. Address:					
Brannen Bank								
21. City:	22. County: Hernando		23. S		tate:	24. Zip Code:		
Brooksville			nao	FL			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.								
1100/0021/			26. Signature of Candidate:					
25. Date: 6 20 20 24			X Sed Sal					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
I, Seth A. Noe do hereby accept the appointment designated above as:								
(Please Print or Type Name)								
■ Campaign Treasurer. □ Deputy Treasurer.								
				29. Signature of Campaign Treasurer or Deputy Treasurer				
28. Date: 6 2012024			x 5ed 711					
DS-DE 9 (Rev. 09/23)				/		Ru	le 1S-2 0001 F A C	