

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

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

(PLEASE PRINT OR TYPE)

INDIAN RIVER COUNTY  
SUPERVISOR OF ELECTIONS

2020 JAN -8 PM 2:21

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)

Laura D. Zorc "Laura Zorc"

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

7557 15th Street  
Vero Beach, Florida 32966

4. Telephone

(772 ) 643-5700

5. E-mail address

LauraZorc2020@aol.com

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

Indian River County School Board District 3

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

Juli White

11. Mailing Address

7557 15th Street

12. Telephone

( 772 ) 559-4944

13. City

Vero Beach

14. County

Indian River

15. State

FL

16. Zip Code

32966

17. E-mail address

LauraZorc2020@aol.com

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

19. Name of Bank

Center State Bank

20. Address

855 21st Street

21. City

Vero Beach

22. County

Indian River

23. State

Florida

24. Zip Code

32960-5503

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

1/8/20

26. Signature of Candidate

X

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

I, Juli White, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

1-8-2020  
Date

X

Signature of Campaign Treasurer or Deputy Treasurer