

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

INDIAN RIVER COUNTY
SUPERVISOR OF ELECTIONS

2021 NOV 23 PM 12:52

(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)

JOSEPH E. FLESCHER

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

279 JOY HAVEN DRIVE
SEBASTIAN FLORIDA 32958

4. Telephone

(772) 388-9531

5. E-mail address

J.FLESCHER@COMCAST.NET

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

COUNTY COMMISSION 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 REPUBLICAN Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

ROSEMARY FLESCHER

11. Mailing Address

279 JOY HAVEN DRIVE

12. Telephone

(772) 388-9531

13. City

SEBASTIAN

14. County

INDIAN RIVER

15. State

FL

16. Zip Code

32958

17. E-mail address

R.FLESCHER@COMCAST.NET

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

19. Name of Bank

MARINE BANK & TRUST

20. Address

1020 US HIGHWAY 1

21. City

SEBASTIAN

22. County

INDIAN RIVER

23. State

FLORIDA

24. Zip Code

32958

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

Nov. 23, 2021

26. Signature of Candidate

X Joseph E. Flecher

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

I, ROSEMARY FLESCHER, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

Nov. 23, 2021

Date

X Rosemary Flecher

Signature of Campaign Treasurer or Deputy Treasurer

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

JOSEPH E. FLESCHER

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

**279 JOY HAVEN DRIVE
SEBASTIAN, FL 32958**

4. Telephone

(772) 388-9531

5. E-mail address

J.FLESCHER@COMCAST.NET

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

COUNTY COMMISSION DISTRICT 2

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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 **REPUBLICAN** Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

CRAIG MARC RAPPEL

11. Mailing Address

1380 11TH LANE

12. Telephone

(772) 778-8885

13. City

VERO BEACH

14. County

INDIAN RIVER

15. State

FL

16. Zip Code

32960

17. E-mail address

cmr@rappelhealthlaw.com

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

19. Name of Bank

MARINE BANK

20. Address

1020 US HWY 1

21. City

SEBASTIAN

22. County

INDIAN RIVER

23. State

FL

24. Zip Code

32960

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25. Date

Nov. 23, 2021

26. Signature of Candidate

X *Joseph E. Fleischer*

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

I, **CRAIG MARC RAPPEL**, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

11/23/2021

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

cmr@rappelhealthlaw.com