

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

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

(PLEASE PRINT OR TYPE)

INDIAN RIVER COUNTY
2022 FEB -3 PM 12:45

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) 3. Address (include post office box or street, city, state, zip code)
 CYNTHIA M. GIBBS 1734 Mistletoe Street

4. Telephone 5. E-mail address
 (772) 228-0252 cmgibbs72@gmail.com Sebastian, FL 32958

6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable:
 School Board Member District 2 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
 CYNTHIA M GIBBS

11. Mailing Address 12. Telephone
 1734 Mistletoe Street (772) 228-0252

13. City 14. County 15. State 16. Zip Code 17. E-mail address
 Sebastian IRC FL 3958 cmgibbs72@gmail.com

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

19. Name of Bank 20. Address
 Wells Fargo 1524 - US1

21. City 22. County 23. State 24. Zip Code
 Sebastian IRC FL 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 26. Signature of Candidate
 2/3/2022 X

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)
 I, CYNTHIA M GIBBS, do hereby accept the appointment
 (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.
2/3/2022 X
 Date Signature of Campaign Treasurer or Deputy Treasurer

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INDIAN RIVER COUNTY
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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)

Cynthia M. Gibbs

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

1734 Mistletoe Street
Sebastian, FL 32958

4. Telephone

(772) 228-0252

5. E-mail address

cmgibbs72@gmail.com

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

District 2 School Board

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

Wendy McDaniel

11. Mailing Address

465 11th Ct

12. Telephone

(850) 528-8145

13. City Vero Beach	14. County Indian River	15. State FL	16. Zip Code 32962	17. E-mail address bocalifephotography@gmail.com
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18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Wells Fargo

20. Address

1524 US-1

21. City Sebastian	22. County Indian River	23. State FL	24. Zip Code 32958
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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 3, 2022

26. Signature of Candidate



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

I, Wendy McDaniel, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2-3-22

Date


Signature of Campaign Treasurer or Deputy Treasurer