

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

INDIAN RIVER COUNTY
SUPERVISOR OF ELECTIONS

2022 MAR 21 PM 2:11

(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)
Ann Marie McCrystal

3. Address (include post office box or street, city, state, zip code)
*511 BAY DRIVE
Vero Beach FLA. 32963*

4. Telephone
(772) 231-5813

5. E-mail address
ammccrystal@yahoo.com

6. Office sought (include district, circuit, group number)
IRC Hospital District Seat 1

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
Hugh McCrystal

11. Mailing Address
511 Bay Drive Vero Beach FL 32963

12. Telephone
(772) 473-8609

13. City
Vero Beach

14. County
Indian River

15. State
FL

16. Zip Code
32963

17. E-mail address
HughMcCrystal@aol.com

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

19. Name of Bank
Northern Trust

20. Address
Beachland Blvd.

21. City
Vero Beach

22. County
Indian River

23. State
FLA.

24. Zip Code
32963

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
3/22/22

26. Signature of Candidate
X Ann Marie McCrystal

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

designated above as: Campaign Treasurer Deputy Treasurer.
3/22/22 Date *X* Signature of Campaign Treasurer or Deputy Treasurer