

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

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

(PLEASE PRINT OR TYPE)

1EMAR09AM1121 SDE LEE CO#1

**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)

CATHLEEN O'DANIEL MORGAN

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

27140 SHELL RIDGE CI  
BONITA SPRINGS, FL 34134-872

**4. Telephone**

(739) 547-4755

**5. E-mail address**

morgan4LEPS@gmail.com

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

LEE COUNTY SCHOOL BOARD  
DISTRICT 7

**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**

CATHLEEN O'DANIEL MORGAN

**11. Mailing Address**

27140 Shell Ridge Ci

**12. Telephone**

( )

**13. City**

Bonita Spgs

**14. County**

Lee

**15. State**

FL

**16. Zip Code**

34134

**17. E-mail address**

morgan4LEPS@gmail.com

**18. I have designated the following bank as my**

Primary Depository     Secondary Depository

**19. Name of Bank**

FINEMARK

**20. Address**

26800 S. TAMiami TR.

**21. City**

BONITA SPRINGS

**22. County**

LEE

**23. State**

FL

**24. Zip Code**

**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**

3/6/2016

**26. Signature of Candidate**

X

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

I, CATHLEEN O'DANIEL MORGAN, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

3/10/16

Date

X

Signature of Campaign Treasurer or Deputy Treasurer