'18MAR29PM0246 SDE Lee Co F1

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

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

(PLEASE PRINT OR TYPE)

NOTE:	This	form	must	be	on	file	with	the	qualifyii	ą
officer	befor	е оре	ning tl	he c	am	paig	n acc	oun	t.	

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 Depository Party									
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip								
LOUIS CHARIOS WAVARRA	code) P.O. BOX 150714								
4. Telephone 5. E-mail address	CAPC COROL Fl. 33915								
(239) 935-9299 LOUNAVARILA & School 18 9001.1. COM									
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if								
Dist. 4 Subsal Bd	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									
LOUIS C. NAVARRA									
11. Mailing Address	12. Telephone								
P. O. BOX 150714 CAPE CORN F. 33915 (239) 435 -9294  13. City 14. County 15. State 16. Zip Code 17. E-mail address  CARE CORN LUU (1, 33915 JUNNAVARAN 4 SCLOOL READ & OGMAN)									
13. City 14. County 15. State 16. Zip Code 17. E-mail address									
CARE CORNI LEE 11. 33915 JUNNAVARAN 4 SCLOOL BEING DOGMAN									
18. I have designated the following bank as my Primary Depository Secondary Depository									
19. Name of Bank	20. Address 114 Hancock Bridge Pkwy W								
21. City 22. County	23. State 24. Zip Code								
Cape Coral Lee	FL 33991								
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								
MAR. 29, 2018	X Lun C. Nonn								
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)									
I,, do hereby accept the appointment (Please Print or Type Name)									
designated above as: Campaign Treasurer Deputy Treasurer.									
mar, 29, 2018 X	Signature of Campaign Treasurer or Deputy Treasurer								