

*20FEB24PM0341 SOE 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 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 MORGAN

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

27140 SHELL RIDGE CI
BONITA SPRINGS, FL 34134-8782

4. Telephone

(739) 947-4755

5. E-mail address

MORGAN4LLPS@
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 MORGAN

11. Mailing Address

27140 SHELL RIDGE CI

12. Telephone

(739) 947-4755

13. City

BONITA SPRINGS

14. County

LEE

15. State

FL

16. Zip Code

34134

17. E-mail address

MORGAN4LLPS@
GMAIL.COM

18. I have designated the following bank as my

☐ Primary Depository ☐ Secondary Depository

19. Name of Bank

FINEMARK

20. Address

26881 S. TAMiami TR

21. City

BONITA SPRINGS

22. County

LEE

23. State

FL

24. Zip Code

34134

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

2/23/20

26. Signature of Candidate

X 

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

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

designated above as:

☐ Campaign Treasurer ☒ Deputy Treasurer.

2/23/20

Date

X


Signature of Campaign Treasurer or Deputy Treasurer