

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY

*10JUN25AM09:45NE Lee Co FI

1. CHECK APPROPRIATE BOX:

☒ Original Appointment Change in: ☐ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party

2. Name of Candidate (in this order: First, Middle, Last)

Sarah Elizabeth Larsen

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

4751 West Bay Blvd #706
Estero, FL 33928

4. Telephone (optional)

(239) 405-5399

5. E-mail address (optional)

sarahelarsen@mac.com

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

Lee County Mosquito Control Area 2

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

Sarah Larsen

11. Mailing Address (If post office box or drawer, also include street address)

4751 West Bay Blvd #706

12. Telephone

(239) 405-5399

13. City

Estero

14. County

Lee

15. State

FL

16. Zip Code

33928

17. E-mail address (optional)

sarahelarsen@mac.com

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

19. Name of Bank

BB&T

20. Street Address

8660 Corkscrew Road

21. City

Estero

22. County

Lee

23. State

FL

24. Zip Code

33928

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

6/22/2010

26. Signature of Candidate

X Sarah Larsen

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

I, Sarah Larsen, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

6/22/2010

Date

X Sarah Larsen

Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

*10JUN25AM09:45NE Lee Co F1

I, Sarah Elizabeth Larsen,

candidate for the office of Lee County Mosquito Control Area 2;

have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X Sarah Larsen
Signature of Candidate

6/22/2010
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).