'14MAY 9 AM1120 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

Officer before opening the	3 Callipa	ign account.							01110	E USE	ONLI
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Depository Party									Party		
2. Name of Candidate (in	this orde	r: First. Middle, L	ast)	T :	3. Add	dress (includ	de post offic	e box or	street, city,	state,	zip
Vincent A. Cummings	A	,	201,		code)	•			, , , , , , , , , , , , , , , , , , ,		
<u> </u>	- -	* * * *			1017 SE 44th Street						
4. Telephone					Cape Coral, FL 33904-5388						
(239) 549-2957	39) 549-2957 vcummings90@hotmail.com										
6. Office sought (include of	listrict, ci	rcuit, group numl	per)		7. If a candidate for a <u>nonpartisan</u> office, check if						
Lee Memorial Health S	ystem				applicable:						
Board Of Directors Dist	•						My intent i	s to run a	ıs a Write-Iı	n cand	idate.
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 I	Party Affi	iliation						Pa	arty cand	didate.	
9. I have appointed the fo	llowing	person to act as	s my	X	Cam	npaign Treas	surer	Deput	ty Treasure	er .	
10. Name of Treasurer or D	eputy Tr	reasurer	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>								
Vincent A. Cummings									·		
11. Mailing Address								12. Tele	phone		
1017 SE 44th Street								(239) 549-29	57	
13. City	14. C	County	15. Sta	ate	16.	Zip Code	17. E-mail	address			
Cape Coral	Lee		FL		339	04-5388	vcummin	ıgs90@l	hotmail.c	om	
18. I have designated the following bank as my											
19. Name of Bank					20. Address						
Iberia Bank				910	101 College Pointe Court						
21. City	_	22. County				23. State			24. Zip Co	ode	
Fort Myers		Lee		FL 33919							
		LARE THAT I HAVE I OF CAMPAIGN DEP								EASURE	R AND
25. Date 26.					26. Signature of Candidate						
09 May 14 X					X Smeet a. Cumins						
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.											
$\mathbf{X} = \mathbf{X} + \mathbf{A} = $											
				Sign	Signature of Campaign Treasurer or Deputy Treasurer						

714MAY 9 RM 1120 SOE LEE CO F1

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

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candidate for the office of LMHS Board Of Directors District #2
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

Signature of Candidate

09 MAY 14

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).