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	V		J	. DO N	JOT PLAN	ON COLLECTING	
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES				QR	SPEADINE 2018 JUN 18 PM	ANY MONEY	
	(Section 106.021(1), F.S.) (PLEASE PRINT OR TYPE)		SUPERS CONSULTIONS				
NOTE: This form must be	alifying						
officer before opening the		OFFICE USE ONLY					
	• •						
Initial Filing of Form	Re-filing to Change		easurer/D		Depository	Office Party	
2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip UNDGAY ANN PUSHMORE 617 HONEYFLOUGA (00)							
4. Telephone 5. E-mail address BRADENUDN, FL 3222							
(954) 278-0005 UNDSAY - PUSHMOREC							
6. Office sought (include district, circuit, group number) SWI+. 40%. If a candidate for a <u>nonpartisan</u> office, check if							
COD SEAT 1 - GREY HAWR Dy 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 AffiliationParty candidate.							
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer							
10. Name of Treasurer or Deputy Treasurer							
11. Mailing Address					12. Telephone		
			()				
13. City	14. County	15. State		Zip Code	17. E-mail address		
18. I have designated the following bank as my Primary Depository Secondary Depository							
				20. Address			
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21. City	22. County			23. State		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			26. Signature of Candidate X / 8 2018				
27. Treasurer	's Acceptance of App			blanks and	check the appropriate	e block)	
I, do hereby accept the appointment							
(Please Print or Type Name)							
designated above as: Campaign Treasurer Deputy Treasurer.							
Χ							
Date Signature of Campaign Treasurer or Deputy Treasurer							