O		, I	dono	tat	end	to	
		Co	llect	orsp	rend (any money.	
APPOINTMENT OF CAMPAIGN TREA	SURER						
AND DESIGNATION OF CAMPAIGN			I do not itend to collect or spend any money, RECEIVED Susan R. Ellik				
DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)		2018 JUN 18 PM 12 37					
(PLEASE PRINT OR TYPE)			SUPERSON SOTIONS				
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 Cha		Freasurer/] Deposito		Office Party	
2. Name of Candidate (in this order: First, Middl Susan R. Ellis	e, Last)	3. Ad	dress (includ) $12-03$	le post offic 3 Nari	hi (C	treet, city, state, zip	
4. Telephone 5. E-mail address			- Bradenton, FI 34202				
(941)306-5987 sellisog@tampabay. rr.com							
6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if							
LWR CDD6 Supervisor Sept#3 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							
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						phone	
			()				
13. City 14. County	15. St	tate 16	. Zip Code	17. E-mai	laddress		
18. I have designated the following bank as n		 Prim	ary Deposito		Seconda	ry Depository	
19. Name of Bank	· y L	20. Add					
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				
pine 11, 2018 X Susan R. Ellos						0	
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.							
Date X Signature of Campaign Treasurer or Deputy Treasurer							

DS-DE 9 (Rev. 10/10)

Rule 1S-2.0001, F.A.C.