## 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

I do not intend to collect or spend any funds.

RECEIVED Ann R. Jun Land

THE COUNTY

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)	3. Address (include post office box or street, city, state, zip
Any Strahall Brintzinghoffer	code)
4 Telephone 5 F-mail address	- 5124 119 DR =
Amy Elizabeth Brintzinghoffer  4. Telephone  5. E-mail address  (941) 518-7005 amye 102010 qmail. com Seat 4 & Lexingtancodd. org  6. Office sought (include district, circuit, group number)  7. If a candidate for a nonpartisan office, check if	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Lexington CDD	аррисавіе.
Board of Supervisors Seat #4 My intent is to run as a Write-In candidate.	
8. <b>If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable:</b> 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	
11. Mailing Address	12. Telephone
( )	
13. City 14. County 15.	State 16. Zip Code 17. E-mail address
·	
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank	20. Address
21. City 22. County	23. State 24. Zip Code
United the B	
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
6/19/18	X Any EButyer Total
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.	
X	
Date	Signature of Campaign Treasurer or Deputy Treasurer