APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

I DO NOT INTEND TO RELEIVE OR Spens FUNDS FOT My Campaign.

RECEIVE

2020 JUN 11 PM 3: 04

CORERVISOR OF ELECTIONS

| officer before opening the campaign account. | | | OFFICE USE ONLY | | | | | | | |
|--|--------------------------|---|-----------------|---------------|-----------------------------------|------------|--------------|----|-------|--|
| 1. CHECK APPROPRIATE BOX(ES): | | | | | | | | | | |
| Initial Filing of Form | Re-filing to Change | e: | easurer/D | eputy _ | Depositor | у 🗆 | Office | | Party | |
| 2. Name of Candidate (in this | ا ممماما | 3. Address (include post office box or street, city, state, zip | | | | | | | | |
| William Ran | code) 7710 EDMONSTON CIT | | | | | | | | | |
| 4. Telephone 5. E-mail address | | | | | | | | | | |
| 4. Telephone 5. E-mail address PRAISENTON H 34201 (941) 483 0812 WRPOOKE & GMAIL. COM | | | | | | | | | | |
| 6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if applicable: My intent is to run as a Write-In candidate. | | | | | | | | | | |
| UNIVERSAY PLACE | | 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 Par | | 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 | County 15. State | | | e 16. Zip Code 17. E-mail address | | | | | |
| 18. I have designated the following bank as my Primary Depository Secondary Depository | | | | | | | | | | |
| | | | | 20. Address | | | | | | |
| 19. Name of Bank 20. Address | | | | | | | | | | |
| 21. City | 22. County | 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 | | | | | | | | | | |
| 6 | X | | | | | | | | | |
| 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 | e of Campai | gn Treasure | er or Depu | ty Treasui | er | | |