	APPOINTMENT OF CAMPAIGN TREASURER	
	AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	2020 DEC -3 AM 9: 50
	(PLEASE PRINT OR TYPE)	
	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 Change:  T	reasurer/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 code)
	THO, NULLING	- 83911 MORIDA
	4. Telephone 5. E-mail address	8324 MARINA R.
	6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
0		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     Image: Write-In in the following person to act as my intent is to run as a party of the following person to act as my intent is to run as a pointed the following person to act as my intent is to run as a pointed the following person to act as my intent is to run as a pointed the following person to act as my intent is to run as a party of the following person to act as my intent is to run as a pointed the following person to act as my intent is to run as a pointed the following person to act as my intent is to run as a pointed the following person to act as my intent is to run as a pointed the following person to act as my intent is to run as a person to act as a my intent is to run as a person to act as a my intent is to run as a person to act as a my intent is act as a person to act as a my intent is act as a my intent is act		
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		Campaign Treasurer Deputy Treasurer
	10. Name of Treasurer or Deputy Treasurer	
	11. Mailing Address 795 25th Ale W. 12. Telephone	
	a getter entransion France	( )
	13. City 14. County 15. Sta	ate 16. Zip Code 17. E-mail address Smull 1 34009 Janaz Styliste Com
	18. I have designated the following bank as my	Primary Depository Secondary Depository
~	19. Name of Bank	20. Address
	MULTUR SOUTH	281. (ILMHULIM N
	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 DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.		
	25. Date	26. Signature of Candidate
	12-3-2020	X
	27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
	I, <u>Janas Kudacill</u> (Please Print or Type Name)	, do hereby accept the appointment
	designated above as: Campaign Treasure	Deputy Treasurer.
	X 0502-3-2020 X	1. Dan
	Date	Signature of Campaign Treasurer or Deputy Treasurer

DS-DE 9 (Rev. 10/10)