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 officer before opening the campaign account.

DS-DE 9 (Rev. 10/10)

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MANATEE COUNTY SUPERVISOR OF ELECTIONS

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

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) Tal Siddique					3. Address (include post office box or street, city, state, zip code) P.O. Box 14395 Bradenton, FL 34280					
4. Telephone	5. E-mail address			- '	1 . 3. Box 14003 Brademon, 1 E 34200					
•	tal@	votetal.co								
Office sought (include district, circuit, group number) Manatee County Commission District 3					7. If a candidate for a <u>nonpartisan</u> office, check if applicable: My intent is to run as a Write-In candidate.					
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a										
☐ Write-In ☐ No Party Affiliation 🔀RepublicanParty candidate.										ındidate.
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🔲 Deputy Treasurer										
10. Name of Treasurer or Deputy Treasurer Rob Phillips										
11. Mailing Address 12. Telephone 555 Metro Place N, Ste 525 (614) 506 0685										
13. City Dublin	- I		15. Sta OH	ate		. Zip Code 017	17. E-mail address rp3@axcapteam.com			
18. I have designated the	ry Depository	y	Secor	ndary Dep	ository					
				l	20. Address 1901 Manatee Avenue West					
21. City Bradenton	*					23. State FL			24. Zip (34205	
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 2					Signa	ature of Can	ididate			
9/19/23					x 1.9					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
Rob Phillips							do he	reby accep	of the appo	ointment
(Please Print or Type Name)										Jillianon
designated above as:	\boxtimes	Campaign Tre	asurer.		, <u> </u>	Deputy Tr	easurer.			
09/19/2023 X (x) (x)										
Date				Signature of Campaign Treasurer or Deputy Treasurer						

Reset

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