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

DS-DE 9 (Rev. 10/10)

RECEIVAL.

2023 OCT -3 PH 1: 04

CANADALE COURTY SUPERVISOR OF ELECTIONS

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

officer before opening the campaign account.							OFFICE	E USE	ONLY
1. CHECK APPROPRIATE BO	OX(ES):								
✓ Initial Filing of Form	Re-filing to Change:	☐ Tre	asurer/De	eputy 🔲	Depository		Office		Party
2. Name of Candidate (in this	order: First, Middle, La	ast)		ess (includ	e post office	box or s	treet, city,	state,	zip
Raymond Turner	Ray D Turnevren	. Com	code)	ove Trail					
4. Telephone 941 - 447 - 5974 5.	E-mail address	AS.		nton, FL 3	34212				
PET - K	a V@Tumerren.com	·		,					
6. Office sought (include distr	er)	7. If a candidate for a <u>nonpartisan</u> office, check if							
Manatee County Commis	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 Par	rty Affiliation	Republi	ican			Pai	rty can	didate.	
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🔲 Deputy Treasurer									
10. Name of Treasurer or Dep	outy Treasurer		***************************************						
Wendy White									
11. Mailing Address			1	12. Telep	hone				
1509 E 9th Ave		(813) 523-0326							
13. City 14. County 15. S			ate 16. Zip Code 17. E-mail address						
Tampa	Hillsborough	FL	3360	05	wendy@c	ampaig	naccour	nting.	org
18. I have designated the following bank as my 🔀 Primary Depository 🔲 Secondary Depository									
19. Name of Bank 20. Address									
The Bank of Tampa			10980 South Belcher Rd						
21. City	22. County			23. State			24. Zip C	ode	
Largo	Pinellas			FL			33777		
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 /	7	26. Signature of Candidate							
OCT 2 /2033			X Chur						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)									
I,, do hereby accept the appointment								nt.	
(Please Print or Type Name)									
designated above as: Campaign Treasurer Deputy Treasurer.									
October 2,2003 X (Sough Albride									
Dafe D	**	5	Signature	of Campaid	in Treasurer	or Denu	ty Treasur	rer	