## 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 filing officer before opening the campaign account.

## RECEIVED

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MANATEE COUNTY
SUPERVISOR OF ELECTION FICE USE ONLY

opening the campaign account.				<u> </u>	ICE OSE ONE!	
1. CHECK APPROPRIATE BOX(ES):						
Minitial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Doffice Party						
2. Name of Candidate (in this order: First, Middle, Last): (Please Print or Type Name)		•	3. Address (include PO Box or Street, City, State, Zip Code):			
Jeffrey David Carman		1	•			
		Longboat	Longboat Key, FL 34028			
4. Telephone: 5. Candidate's Voter Registration #: 6. Email Address:						
				man @g	mail. com	
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:						
Manatee County School Board, Dist 3 I Intend to run as a Write-In Candidate.						
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a						
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐Party candidate.						
10. I have appointed the following person to act as my:						
11. Name of Treasurer or Deputy T	12. Telephone:	· · ·				
Jeffrey D. Carman (407) 653 7618 Jeffrey D. Carman & Grail 1. C. City: 16. State: 17. Zip Code:						
14. Mailing Addres/s:	15.	City:	16. State	17.	Zip Code:	
6901 Poinsettia Avenue	ngboat Key			1228		
18. I have designated the following bank as my (check appropriate box): 🛱 Primary Depository 🗌 Secondary Depository						
19. Name of Bank:		20. Address: 7206	7206 Manatee Avenue			
21. City: Brochestor	<b>↑</b>	County:	23. State	: <b>24</b> .	Zip Code:	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.						
25. Date: 30 Accidental and a second						
JOHN 1 GOOT KENNING						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)						
I, Jeffry D. Carman do hereby accept the appointment designated above as: (Please Print or Type Name)						
¹⊠.Ca	☐ Deput	☐ Deputy Treasurer.				
28. Date: 30 April 5	29. Signature					
DS-DE 9 (Rev. 09/23)		7	<del></del>	Rule 1	S-2.0001, F.A.C.	