## 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.

## RECEIVED

2017 JUN 22 AM 10: 53

SUPERVISOR OF ELECTIONS MARION COUNTY, FLORIDA

OFFICE USE ONLY 1. QHECK APPROPRIATE BOX(ES): Initial Filing of Form
Re-filing to Change: Treasurer/Deputy
Depository 2. Name of Gandidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip Edward Paul W. Bon 6960 SW155th Street Dunnellon, FC 3443Z 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if Marion County School Beard applicable: My intent is to run as a Write-In candidate. Wistrict 3 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 Party Affiliation candidate. Party 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer Mailing Address

6960 5Wi55th Street

City

14. County

15. State

16. Zip Code

17. E-mail address

Dunnellon

Max. on

FL, 34432 edand danna

""" Primary Depository

Secondary Depository 13. City 18. I have designated the following bank as my □ Secondary Depository 19. Name of Bank merica Bank G 22. County 21. City 24. Zip Code Makion 34480 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 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. (Please Print or Type Name) , do hereby accept the appointment X designated above as: Campaign Treasurer Deputy Treasurer. 2017 Helie Signature of Campaign Treasurer or Deputy Treasurer