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

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SUPERVISOR OF ELECTIONS MARION COUNTY, FLORIDA

OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip Edward Paul W. Ison 6960 SW 1554h Street Dunnellein, FC 34432 (352) 237.8650 edw. Isangea as I.com.
6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if Marion County School Board applicable: 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 My intent is to run as a Write-In candidate. Write-In No Party Affiliation Party candidate. 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer 11. Mailing Address 12. Telephone 6960 5W15542 Street (352) 237-2 iy 14. County 15. State 16. Zip Code 17. E-mail address ennellon Marian Fc/ 34432 edw. Isange Ra (352) 237.8650 13. City 18. I have designated the following bank as my Primary Depository 19. Name of Bank 20. Address 5R 260 21. City 23. State 24. Zip Code Marion 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. , do hereby accept the appointment (Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer. Signature of Campaign Treasurer or Deputy Treasurer