

**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.

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2017 NOV 16 PM 3:39

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 Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Pete Anderson

3. Address (include post office box or street, city, state, zip code)

6101 NE 25th Ave
Ocala, FL 34479

4. Telephone

(352) 690-6889

5. E-mail address

commonsensepete2016@gmail.com

6. Office sought (include district, circuit, group number)

School Board District 5

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

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 _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Kim Monday

11. Mailing Address

4540 SW 46th Ave.

12. Telephone

(352) 426-3746

13. City

Ocala

14. County

Marion

15. State

FL

16. Zip Code

34474

17. E-mail address

kimsmonday@gmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Harbor Community Bank

20. Address

4201 East Silver Springs Blvd.

21. City

Ocala

22. County

Marion

23. State

FL

24. Zip Code

34470

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

November 16, 2017

26. Signature of Candidate

X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Kim Monday, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

11/16/2017

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer