## 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

2018 JAN 19 PM 3: 19

SUPERVISOR OF ELECTIONS MARION COUNTY, FLORIDA

officer before opening the campaign account.					OFFICE USE ONLY								
1. CHECK APPROPRIATE BOX(ES):													
Initial Filing of Form	Re	filing to Change:	- I	Гreasu	rer/Dep	outy [	Depositor	у 🔲	Offi	се 🔲	Party		
2. <b>Name of Candidate</b> (in this order: First, Middle, Last) Eric Ruben Cummings					3. Address (include post office box or street, city, state, zip code)								
4. Telephone	elephone 5. E-mail address					48 Pecan Drive Pass Ocala, FL 34472							
	PASTORCUMMINGS69@ICI				caia, i	FL 3447							
6. Office sought (include district, circuit, group number)						7. If a candidate for a <u>nonpartisan</u> office, check if							
Marion County School Board District 3					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 F	Party Affi	liation						Pa	ırty (	candidate.			
9. I have appointed the following person to act as my													
10. Name of Treasurer or Deputy Treasurer Barbara Lawrence													
11. Mailing Address 8260 S.W. 135th Loop						12. Telephone ( 352 ) 895-6964							
13. City Ocala	14. C Mario	ounty On	15. St FL		16. Zij 34473	. Zip Code 17. E-mail address BLAWRE3496@AOL.COM							
18. I have designated the following bank as my													
19. Name of Bank Regions Bank				20. Address 10250 SW 86th Circle									
21. City Ocala		22. County Marion				23. State L			24. Zi 3448	ip Code 1			
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.													
					26. Signature of Candidate								
01/19/2018					X CR								
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
Barbara Lawrence					, do hereby accept the appointment								
(Please Print or Type Name)													
designated above as:  Campaign Treasurer  Deputy Treasurer.													
01/19/20	18		X	M	inds	ana	0	Lare	120	we	,		
Date				Signature of Campaign Treasurer or Deputy Treasurer									