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 FEB 20 PM 2: 21

SUPERVISOR OF ELECTIONS MARION COUNTY, FLORIDA

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):													
✓ Initial Filing of Form		reasu	urer/D	Deputy [Deposit	ory 🔲	Office		Party				
2. Name of Candidate (in t		3. Address (include post office box or street, city, state, zip code)											
Elishada E. Charlot					5550 s.w 103 St. Rd.								
4. Telephone	Γelephone 5. E-mail address					Ocala, FL. 34476							
(352) 2373966	373966 lizcharlot92@gmail.com												
6. Office sought (include d		7. If a candidate for a <u>nonpartisan</u> office, check if											
Marion County School		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 N/A Party candidate.													
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer													
10. Name of Treasurer or Deputy Treasurer													
Elishada E. Charlot													
11. Mailing Address	\tag{\tag{\tag{\tag{\tag{\tag{\tag{												
	5550 S.W 103 Street Rd. (352) 2373966												
13. City				ate	1	Zip Code	17. E-ma	il address		VI.			
Ocala	FL.	34476 rcharlot1@cfl.rr.com											
18. I have designated the following bank as my													
19. Name of Bank				20. Address									
Campus USA	······································	-	!	5350	0 S.V	N. College	e Rd.						
21. City		22. County				23. State			24. Zip Code				
Ocala		Marion				FL.			34474				
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													
2/20/2018 X () Cou () ()										T Comment			
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
ı, Elishada E. Charlot						, do hereby accept the appointment							
(Please Print or Type Name)													
designated above as: Campaign Treasurer Deputy Treasurer.													
2/20/20	18		X (\mathcal{O} .	1	106	6		The second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a section in the second section in the section is a section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section i				
Date			Signature of Campaign Treasurer or Deputy Treasurer										