

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

RECEIVED

2018 FEB 23 AM 11:58

SUPERVISOR OF ELECTIONS
MARION COUNTY, FLORIDA

**NOTE: This form must be on file with the qualifying
officer before opening the campaign account.**

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)

LeAnn Patricia Mackey Barnes

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

8141 SW 56th Ter
Ocala, FL 34476

4. Telephone

(352) 622-1280

5. E-mail address

ulfew2002@yahoo.com

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

County Court Judge Group 3

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

LeAnn Mackey Barnes

11. Mailing Address

8141 SW 56th Ter

12. Telephone

(352) 622-1280

13. City

Ocala

14. County

Marion

15. State

FL

16. Zip Code

34476

17. E-mail address

ulfew2002@yahoo.com

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

19. Name of Bank

Campania USA Credit Union

20. Address

5356 SW College Rd

21. City

Ocala

22. County

Marion

23. State

FL

24. Zip Code

34476

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

2/23/18

26. Signature of Candidate


X 

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

I, LeAnn Mackey Barnes, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

2/23/18
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer