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SUPERVISOR OF ELECTIONS  
MARION COUNTY, FLORIDA

**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.**

**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)  
Kelly Diane King

3. Address (include post office box or street, city, state, zip code)  
621 NE 55th Street  
Ocala, FL 34479

4. Telephone  
(352 ) 817-7371

5. E-mail address  
kellyking2018@gmail.com

6. Office sought (include district, circuit, group number)  
Marion County 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  
Rebecca Stephens

11. Mailing Address  
10353 SW 73rd Ave

12. Telephone  
( 352 ) 804-0960

13. City  
Ocala

14. County  
Marion

15. State  
FL

16. Zip Code  
34476

17. E-mail address  
Stephensr786@gmail.com

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

19. Name of Bank  
CenterState Bank

20. Address  
1632 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  
03/09/2018

26. Signature of Candidate  
 *Kelly King*

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
I, Rebecca Stephens, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.  
03/09/2018       *Rebecca Stephens*  
Date      Signature of Campaign Treasurer or Deputy Treasurer