

**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

2020 JAN 17 AM 11:16

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)

Cynthia Anne Moody

4. Telephone

(352) 361-4475

5. E-mail address

camoody@cox.net

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

4522 NE 13th Street
OCALA, FL 34470

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

clerk of courts, Comptroller

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 ☒ Democrat Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Cynthia A. Moody

11. Mailing Address

4522 NE 13th Street

12. Telephone

(352) 361-4475

13. City

OCALA

14. County

marion

15. State

FL

16. Zip Code

34470

17. E-mail address

Camoody@cox.net

18. I have designated the following bank as my

☐ Primary Depository ☐ Secondary Depository

19. Name of Bank

Campus USA CU

20. Address

2444 E. Silver Springs BL

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

Jan 17, 2020

26. Signature of Candidate

X Cynthia A. Moody

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

I, Cynthia Moody, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☐ Campaign Treasurer ☒ Deputy Treasurer.

1/17/2020
Date

X

Cynthia Moody
Signature of Campaign Treasurer or Deputy Treasurer