## **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

MEGEL:ED

2021 MAY 28 P 3: 56

CITY OF CUALA, PLUNO. CITY CLERK

officer before opening the campaign account.						OFFICE	E 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)			3. Address (include post office box or street, city, state, zip						
Kevin Daniel Lopez			code) 2401 SE 7th ST						
4. Telephone	5. E-mail address	Oca	Ocala, FL 34471						
(941 ) 920-3938	KevinLopezForOcala@gm	nail.¢om							
6. <b>Office sought</b> (include district, circuit, group number)			7. If a candidate for a <u>nonpartisan</u> office, check if						
City Council, District 4			applicable:						
			My intent is to run as a Write-In candidate.						
8. <b>If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable:</b> My intent is to run as a									
Write-In No	Party Affiliation				Part	ty cand	didate.		
9. <b>I have appointed the following person to act as my</b> Campaign Treasurer Deputy Treasurer									
10. Name of Treasurer or Deputy Treasurer									
Veronica Lopez									
11. Mailing Address  12. Telephone									
2401 SE 7th ST			(	352 )	208-009	93			
13. City	14. County 15. S		6. Zip Code	Δ.			, ,		
Ocala	Marion FL	34	471	vlshau	<u>l@ma</u>	illousf	.eo	U	
18. I have designated the following bank as my									
19. Name of Bank MidPlan da Credit Union 1520 E Silver Sorings Blyd									
21. City	22. County	102	23. Sta	2		24. Zip Co	ode		
Ocala	Manon		F	L		340	170	) .	
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. Sigi	nature of C	andidate 0	-				
5/2	3/2021	X	Zhe.	n Jen					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)									
i, Vero		, do hereby accept the appointment							
(Please Print or Type Name)  designated above as:									
5/28/2021 X Vdopen									
" Date	<b>)</b>	Signatui	e of Camp	aign Treasurer o	r Deputy	/ Treasure	er		