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.

PECELVED.

2021 JUL-6 P 4: 13

OFFY OF OCALA, ILLORIDA CITY CLERK

officer before opening the campaign account.		OFFICE USE ON	NLY	
1. CHECK APPROPRIATE BOX(ES):				
Initial Filing of Form	Re-filing to Change:	: Tre	reasurer/Deputy Depository Defice Pa	arty
2. Name of Candidate (in this order: First, Middle, Last)			3. Address (include post office box or street, city, state, zip	
BARBARA FITOS		code) 926 SE 12TH STREET		
4. Telephone	5. E-mail address		OCALA FL 34471	
(352) 804-0306	fitosforocala@gmail.d	com		
6. Office sought (include district, circuit, group number)			7. If a candidate for a nonpartisan office, check in	f
CITY COUNCIL - DISTRICT 4			applicable:	
			My intent is to run as a Write-In candida	ite.
8. If a candidate for a <u>partisan</u> 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				
Barbara Fitos				
11. Mailing Address			12. Telephone	
926 SE 12th Street			(352) 804-0306	
13. City UCALA	14. County MARION	15. State	te 16. Zip Code 17. E-mail address 3447/ FITWOCOLO GRAN. CM	
18. I have designated the following bank as my				
19. Name of Bank			20. Address	
Regions Bank		612 E. Silver Springs Blvd.		
21. City	22. County		23. State 24. Zip Code	
Ocala	Marion		Florida 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		1	26. Signature of Candidate	
07/06/2021 X			x Thelinifetal	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)				
I, BARBARA FITOS			, do hereby accept the appointment	
(Please Print or Type Name)				
designated above as:				
07/06/2021 X Sallaetets				
Date		Signature of Campaign Treasurer or Deputy Treasurer		