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

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CITY OF OUALA, FLORE.

officer before opening the campaign account. OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Re-filing to Change: Treasurer/Deputy Depository Initial Filing of Form Office 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip 417. SE 36th Lane A. Telephone Juergens

5. E-mail address Ocala, FL. 34471 (352) 209-0113 | Rwluergens@gmail.com 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: City Council District #3 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 candidate. Party **Deputy Treasurer** 9. I have appointed the following person to act as my Campaign Treasurer 10. Name of Treasurer or Deputy Treasurer Ciara Ann Juergens 11. Mailing Address 12. Telephone 412 SE 36th Lane (352) 4847568 13. City 14. County 15. State 16. Zip Code 17. E-mail address Cyailaian @ gmail, com Marion 34471 SlsPrimary Depository □ Secondary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address 112 N Magnolla Ave Mainstreet Bank 23. State 21. City 22. County 24. Zip Code Marion Florida 34475 SISSO 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. Signature of Candidate 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) (Please Print or Type Name) Deputy Treasurer. designated above as: Campaign Treasurer 9-3-2021 X Signature of Campaign Treasurer or Deputy Treasurer